

# The Aboriginal Health & Medical Research Council of NSW

Annual Report 2011-12



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### **The Aboriginal Health and Medical Research Council of New South Wales**

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### **About the artwork:**

Reflecting the community focus of the AH&MRC, all of the artwork in this *Annual Report* was created by members of our staff, both Aboriginal and non-Aboriginal, during an art workshop held in April 2012. The employees who created these works of art are:

Lisa Camillo	Kristie Harrison
Megan Campbell	Kylie Haywood
Jo Coutts	Sara Knuckey
Katarina Curkovic	Kerri Lucas
Elizabeth Dwyer	Angela Nicholas
Mathew Fields	Jasmine Sarin
Kaylie Harrison	Dina Saulo

The theme of the cover painting is “Working Together for Health of the Community”. In the centre is a large cluster of people meeting, which represents the AH&MRC. The AH&MRC is surrounded by circles, representing our members, Aboriginal Community Controlled Health Services, and the many different communities they serve. The painting uses a variety of symbols, including handprints, footprints and lines denoting waterways and other connections, to indicate partnerships and the sharing of knowledge, as well as to suggest how a strong sense of family, culture and history all contribute to the health of the community.

Edited by Matthew Rodgers  
Media & Communications Coordinator, AH&MRC

Design by Publicstyle [Cover & pages 1-40]

<http://publicstyle.com.au>

The AH&MRC wishes to advise people of Aboriginal descent that this document may contain images of persons now deceased.



**Working Together for the  
Health of the Community**



# Aboriginal Health and Medical Research Council of NSW Annual Report 2011-12

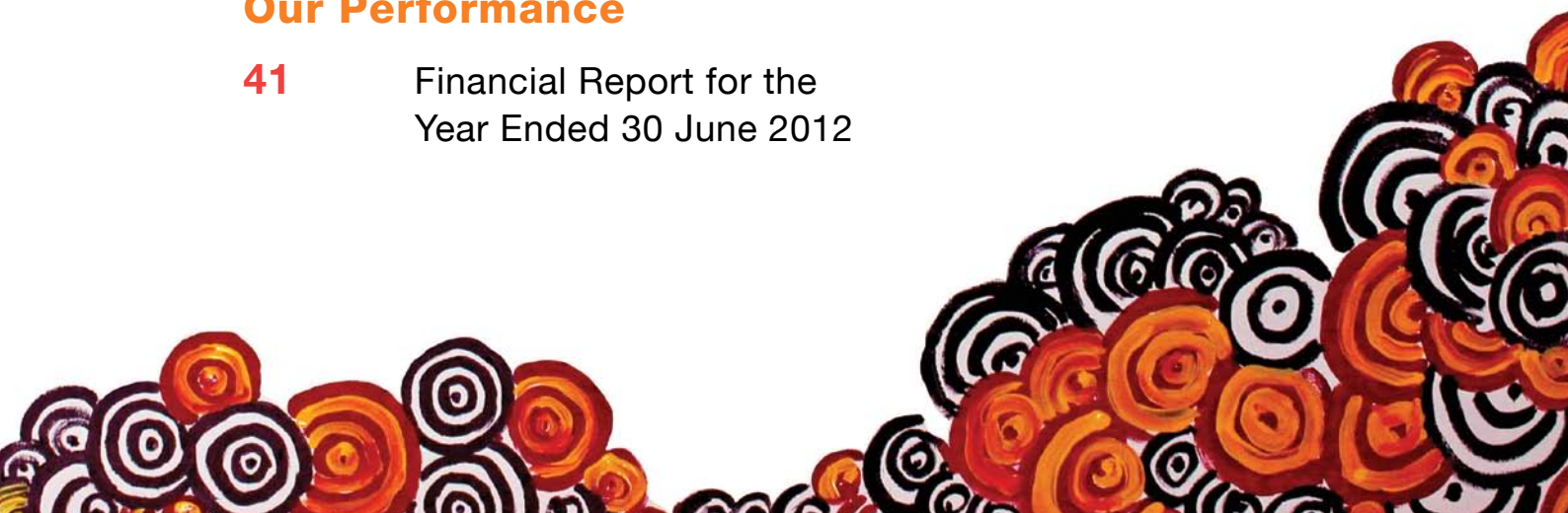
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# A Message from the Chairperson



Mrs Christine Corby, OAM  
AH&MRC Chairperson

AT THE END OF ANOTHER BUSY YEAR, it is my great pleasure to present the Aboriginal Health and Medical Research Council of NSW's *Annual Report 2011-12*.

Working always towards our vision of achieving health equity for Aboriginal people and supporting our member services to provide comprehensive and culturally appropriate primary health care to the Aboriginal community, the Aboriginal Health and Medical Research Council (AH&MRC) has focused on key opportunities to advance our short-term objectives. We have also continued to make good progress toward achieving our long-term strategic objectives.

Significantly, the AH&MRC received Quality Improvement Council (QIC) accreditation in February 2012 and has implemented an ongoing program of continuous improvement as we strive for excellence in all that we do.

The AH&MRC's participation in the development of a 10-Year Aboriginal Health Plan for NSW, in partnership with the NSW Ministry of Health, has seen us continue to bring the expertise of Aboriginal Community Controlled Health Services (ACCHSs) to the health care system, including policy and strategic planning.

I would like to take the opportunity to thank the NSW Government for honouring its commitment to work in partnership with the AH&MRC. We look forward to a Plan for the NSW Ministry of Health that embodies recognition of the unique role of the Aboriginal Community Controlled Health sector and the long-standing principles of the *NSW Aboriginal Health Partnership Agreement* as the foundation of achieving a shared vision for Aboriginal health with all stakeholders in the broader NSW health system.

## **A New Health Landscape**

Responding to the new health landscape following the reforms in NSW and nationally over recent years, the AH&MRC has consistently advocated for the continued support of the Aboriginal Community Controlled Health sector and its ongoing role in the development of policy, planning and service delivery.

The AH&MRC has worked with the National Aboriginal Community Controlled Health Organisation (NACCHO) and its Affiliates from other jurisdictions to facilitate input and engagement at the national level, particularly with the new Australian Medicare Local Network.

## Our commitment to helping Aboriginal people achieve true physical, cultural, social and emotional wellbeing is as strong today as it was when the AH&MRC was established

Within NSW, the AH&MRC has advocated for partnerships between ACCHSs and Local Health Districts in the spirit of the *NSW Aboriginal Health Partnership Agreement*. The need for such partnerships was resoundingly urged in the *Statement of Intent*, which was signed in by both sides of Parliament in 2010, and commits current and future governments to improving the health and wellbeing of Aboriginal people in NSW.

We view the AH&MRC's involvement with the Coalition of Aboriginal Peak Organisations (CAPO) as another important platform from which we can influence Aboriginal Affairs policy in NSW. CAPO is represented on the Ministerial Taskforce on Aboriginal Affairs, which is consulting with Aboriginal communities about employment, education and service delivery issues — all of which are social and economic determinants of health.

Importantly, through the continued support of a number of key partners, the AH&MRC has been able to deliver positive outcomes in a number of program areas, all of which are outlined in the body of this *Annual Report*. We would like to thank our many partners for the commitment and respect they have demonstrated over many years of working with us.

In acknowledging our Board of Directors, I would like to stress the important role they play in the on-going success and stability of the AH&MRC. Our Board members have not only displayed strong community leadership in their own right, they also have helped to inform our decision making by bringing a wealth of crucial community knowledge from their respective regions to bear on all discussions.

It is not possible to look at the impressive program of work delivered over the past year without acknowledging the talented team of employees who work at all levels of the AH&MRC. The quality and range of our projects deserve to be commended, so to our staff I wish say “thank you” to one and all.

Finally, thank you also to our members for their support and involvement in contributing to the work of the AH&MRC. Thank you for allowing your staff members to take up roles as Directors, for attending our many meetings and workshops, and for participating on the steering committees for our conferences and other projects. We couldn't do it without you.

The AH&MRC remains steadfast in our support for our members, the Aboriginal Community Controlled Health and Health-Related Services in NSW. Our commitment to transform NSW into a state where Aboriginal people can achieve true physical, cultural, social and emotional wellbeing for both themselves and their communities is as strong today as it was when the AH&MRC was established 27 years ago.

**Yours in unity,**



**Mrs Christine Corby, OAM**  
Chairperson



# A Better Health Future for Aboriginal People in NSW

THE ABORIGINAL HEALTH AND MEDICAL RESEARCH Council of New South Wales (AH&MRC) is the peak representative body and voice of Aboriginal communities on health in NSW. We represent our members, the Aboriginal Community Controlled Health Services (ACCHSs) that deliver culturally appropriate comprehensive primary health care to their communities.

Aboriginal Community Control has its origins in Aboriginal people's right to self-determination, as outlined in the 2007 *United Nations Declaration on the Rights of Indigenous Peoples*. This is the right to be involved in

health service delivery and decision making according to protocols or procedures determined by Aboriginal communities based on the Aboriginal definition of health, as stated in the 1989 *National Aboriginal Health Strategy*:

*Aboriginal health means not just the physical wellbeing of an individual but the social, emotional and cultural wellbeing of the whole Community in which each individual is able to achieve their full potential as a human being, thereby bringing about the total wellbeing of their Community. It is a whole-of-life view and includes the cyclical concept of life-death-life.*

The AH&MRC is governed by a Board of Directors, who are Aboriginal people elected by our members on a regional basis. We represent our members and their communities on Aboriginal health at state and national levels.

### Our Vision for Aboriginal Health

- Aboriginal Community Controlled Health Services are accessible, sustainable, adequately resourced, have a skilled workforce and meet the health needs and aspirations of Aboriginal people.
- Aboriginal people experience self-determination in all areas of their lives.
- Aboriginal people achieve physical, cultural, social and emotional wellbeing and contribute to the overall health, wellbeing and strength of their communities.

### Our Purpose

- Lead the Aboriginal health agenda for better policies, programs, services and practices.
- Ensure Aboriginal knowledge informs decision-making processes.
- Support, strengthen and sustain Aboriginal Community Controlled Health Services.

### Our Values

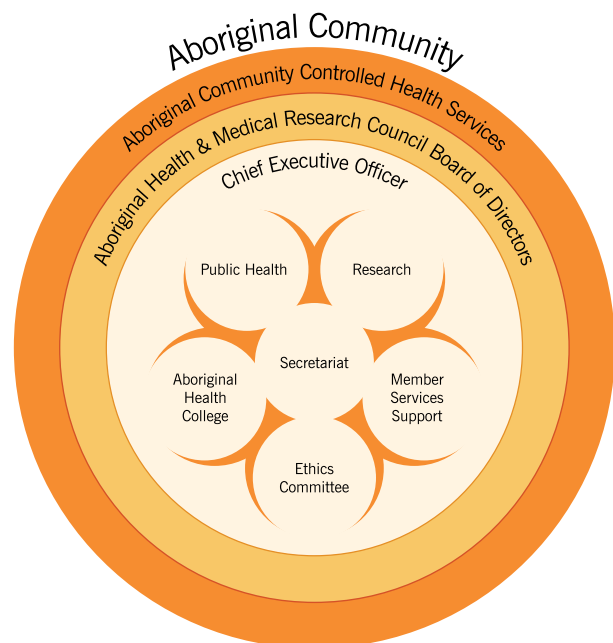
The AH&MRC values and commits to:

- Aboriginal culture and sovereignty;
- Aboriginal Community Control;
- Aboriginal wholistic health;
- Cultural respect, integrity and inclusion;
- Human rights and social justice;
- Quality and accountability;
- Genuine and meaningful partnership.

### Our Goals

1. To improve the health of Aboriginal people across NSW.
2. To improve Aboriginal people's access to culturally appropriate and high quality comprehensive primary health care services.
3. To increase acceptance and respect for Aboriginal Community Control as a best-practice model for achieving Aboriginal health improvement.
4. To achieve universal recognition of the AH&MRC as the lead representative organisation on Aboriginal health in NSW.
5. To strengthen the capacity of ACCHSs in NSW to deliver high quality, comprehensive, wholistic primary health care services.

### AH&MRC Organisational Chart

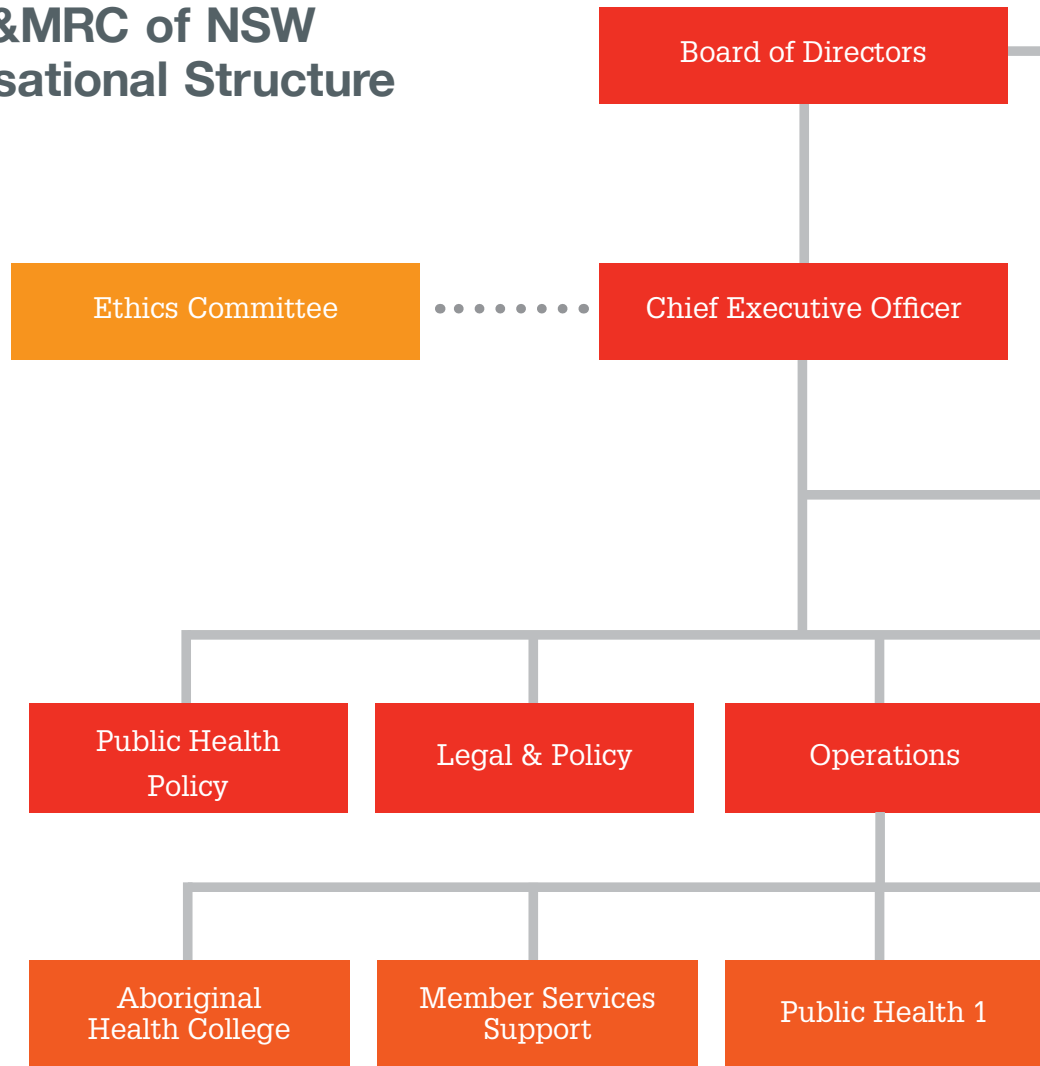


The following outcome indicators will tell us how far we progress towards achieving our goals:

- There are improvements in health outcomes for Aboriginal people that reduce the current gap between Aboriginal and non-Aboriginal people's health outcomes in NSW;
- There is an increase in the number, scope and capacity of Aboriginal Community Controlled Health Services;
- The Aboriginal Community Controlled approach to service delivery is acknowledged and supported as a best-practice model for improving health services and outcomes for Aboriginal people;
- External stakeholders, including state and federal governments, consistently seek the AH&MRC's expertise in planning and decision making on Aboriginal health in NSW and act on the direction they are given.



# AH&MRC of NSW Organisational Structure



Dancers prepare a Welcome to Country ceremony at the AH&MRC Aboriginal Health College ▼



## Focus Areas and Objectives

We aim to achieve our goals by focusing on four priority areas:

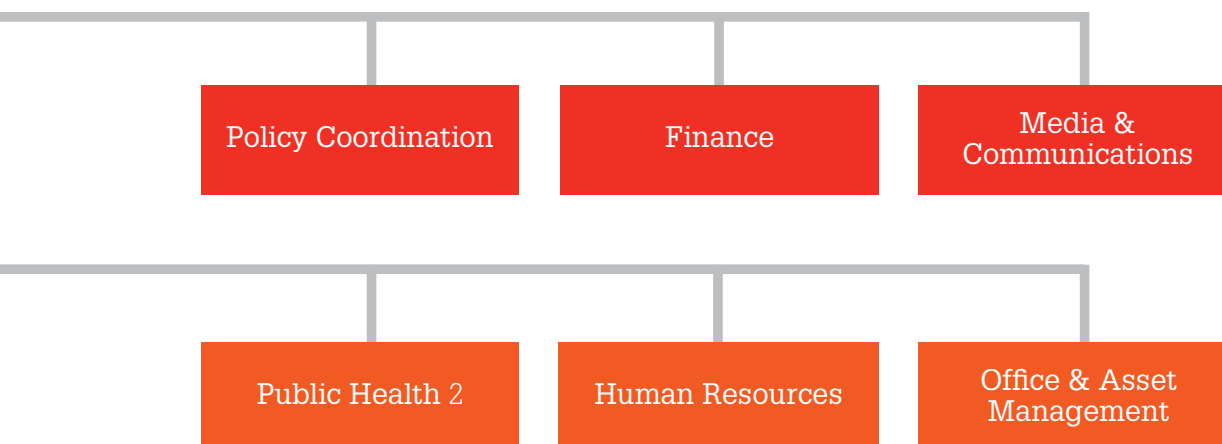
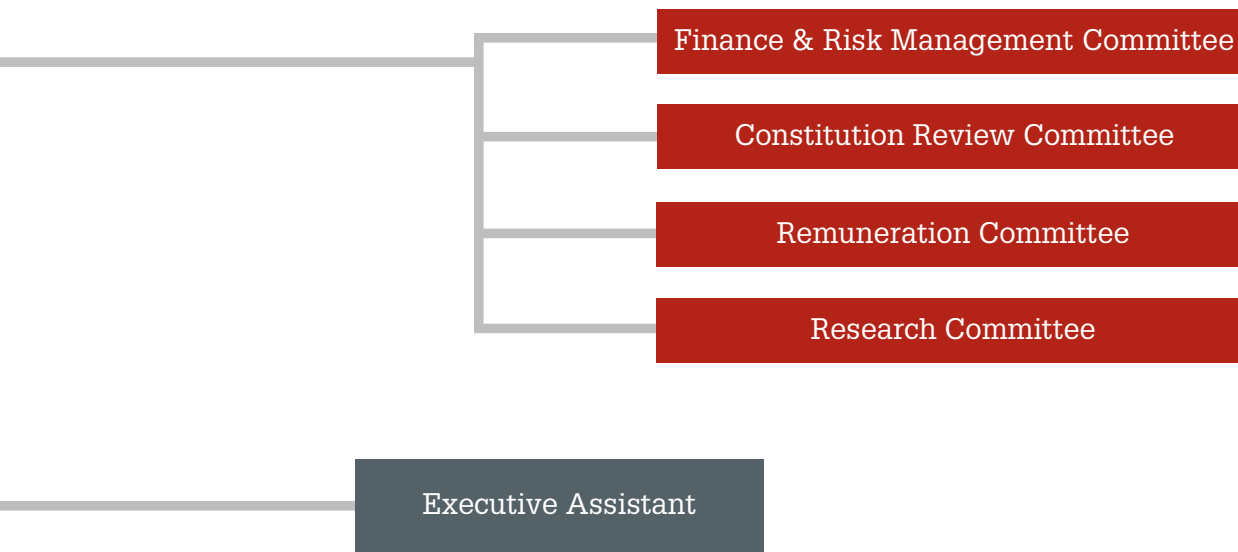
- Self-determination;
- Relationships;
- Workforce development;
- Health services and programs.

## Our Current Work

The AH&MRC's program of work has evolved considerably since the organisation was established in 1985. Our current set of activities is organised across the following areas:

- **Member Support Services:** Governance, service development, ICT, human resources, industrial relations and accreditation;





The staff of the AH&MRC of New South Wales  
 Photo: Peter Cochran ▼

- **College of Aboriginal Health:** Aboriginal and non-Aboriginal workforce development;
- **Public Health:** Policy, representation and advocacy, research and workforce development;
- **Ethics and Research:** Review and support of ethical research proposals,
- **Budgets and Finance:** Financial management and advice.

**Our Members**

The list of AH&MRC Members can be found on the AH&MRC website: <http://www.ahmrc.org.au>



# Chief Executive Officer Report: Highlights 2011-12



Sandra Bailey, CEO, AH&MRC

OVER THE PAST YEAR, THE ABORIGINAL HEALTH AND Medical Research Council of NSW (AH&MRC) has continued to deliver in a number of strategic areas/objectives aimed at achieving important outcomes for our member Aboriginal Community Controlled Health Services through the implementation of numerous programs and initiatives.

We have consolidated our achievements within all of the key areas of our *Strategic Plan 2011-2014*. These are:

- To increase the effectiveness of the AH&MRC's active involvement in decision making regarding Aboriginal health in NSW;
- To improve the quality and effectiveness of relationships with all stakeholders;
- To strengthen the capability and competence of the Aboriginal health workforce;
- To ensure Aboriginal health programs and services are effective, sustainable and reflect local Aboriginal community needs.

## **To increase the effectiveness of the AH&MRC's active involvement in decision making regarding Aboriginal health in NSW**

At the AH&MRC, we believe that in order to achieve these outcomes the recognition, protection and continued advancement of the inherent rights, cultures and traditions of Aboriginal people must be acknowledged. *The United Nations Declaration on the Rights of Indigenous Peoples* reinforces this imperative and emphasises the role of self-determination in any processes to address disadvantage within the Aboriginal community. Adopted in 2007, the *Declaration* upholds the rights of Indigenous peoples and calls on states to consult and cooperate in good faith with the peoples concerned through their own representative institutions in order to obtain their "free, prior and informed consent before adopting and implementing legislative or administrative measures that may affect them".

Achieving health equity for NSW will require governments, the Aboriginal Community Controlled Health sector and other health services to work together towards the goal of a NSW health system that provides good access and good care for Aboriginal people. To achieve sustainable progress in addressing health inequities, Aboriginal people must be recognised as distinct and equal partners not only in words but in action.

## **To improve the quality and effectiveness of relationships with all stakeholders**

During the past year, a great deal of our efforts were spent working with the NSW Government, which in 2011 reaffirmed its commitment to Aboriginal health by pledging to collaborate with Aboriginal organisations, communities and advocates to devise a 10-year Aboriginal Health Plan for the State.

The AH&MRC, in collaboration with the Centre for Aboriginal Health, participated in the consultation process to support the development of this 10-year Aboriginal Health Plan for NSW. The AH&MRC helped to organise many of the 250 interviews that were conducted with key stakeholders,

including many health providers from the Aboriginal Community Controlled Health sector, and also assisted with the regional consultation workshops. The AH&MRC and the NSW Government subsequently co-hosted a Health and Wellbeing Forum in November 2011 at the AH&MRC's Aboriginal Health College, where a select group of senior leaders and key decision makers from across the health system gathered to offer insights into the Plan's development. This work, and feedback from web-based submissions, culminated in the release of the discussion paper *Towards an Aboriginal Health Plan for NSW* on 22 March 2012, which was National Close the Gap Day. The AH&MRC made two formal submissions during this process.

The AH&MRC was also invited by the NSW Ministry of Health to write an article for publication in the *NSW Public Health Bulletin* on the importance of partnership in improving Aboriginal health.

The AH&MRC is also participating in a review of the *NSW Aboriginal Health Framework Agreement*, which was originally designed to bring about partnership between the Commonwealth and State governments and the Aboriginal Community Controlled Health Sector. We also continue to renew and build our relationships with non-government organisations which can contribute to improving Aboriginal health in NSW.

Lastly, another significant achievement by the AH&MRC team in 2011-12 was achieving QIC Organisational Accreditation through QMS as part of our own continuous improvement journey.

### **To ensure Aboriginal health programs and services are effective, sustainable and reflect local Aboriginal community needs**

As always, the work of the AH&MRC has involved the delivery of programs and services to support the important role that our member services play in the improvement of Aboriginal health in NSW.

Supporting the business quality of ACCHSs is the primary focus of our Member Services Support Unit. In 2011-12 the AH&MRC provided valuable support to members in the form of consultations, site visits and one-on-one activities — all tailored to the specific needs and requirements of our member services. The Member Services Support Unit's Accreditation Team also supported our member ACCHSs to achieve both clinical and organisational accreditation under the Commonwealth's *Establishing Quality Health Standards Continuation* (EQHS-C) measure. The AH&MRC also met with government bodies regarding the Aboriginal Community Controlled Health Services model and regulatory obligations.

Assisting our member ACCHSs to build sustainable and effective continuous quality improvement systems of their own is another important priority of the AH&MRC. Our aim is to strengthen capacity and quality in service delivery within the changing policy and service delivery landscape. In 2011-12, through the establishment of our AH&MRC Continuous Quality Improvement (CQI) program, we laid the foundations for this to happen by conducting detailed assessments of needs during site visits to ACCHSs and also through the delivery of workshops to support each organisation's use of the Clinical Audit Tool (CAT) for ongoing quality improvement.

In 2011-12 the AH&MRC Public Health Unit promoted Aboriginal health through a number of vibrant campaigns, conferences and activities, using innovative approaches to bring critical health messages to Aboriginal communities. These include:

- *It's Your Choice, Have a Voice: Rights, Respect and Responsibility*. This campaign aimed to empower young Aboriginal people to make informed choices about sexual and reproductive health and related alcohol and other drug issues. The campaign was rolled out to 14 communities in NSW and reached at least 4,000 young people aged 12-19.
- *Where's the Shame, Love Your Liver*. This program was created to increase Aboriginal people's knowledge and awareness of hepatitis C in an environment where stigma and shame are prevalent. It was rolled out to 10 communities across NSW in partnership with award winning hip hop group The Last Kinection. So far, the campaign has produced some 13 posters, 36 songs and 31 film clips that were developed by participants and distributed as educational resources throughout NSW.
- *The Living Longer Stronger: The AH&MRC Chronic Disease Conference 2012*, held in Sydney in June 2012, focused on building skills and knowledge for Aboriginal communities to better address chronic disease, particularly through ACCHSs. It was an outstanding success, with over 120 participants who attended over the course of the two-day event. A range of expert presentations, educational workshops and interactive planning sessions were delivered, providing an excellent opportunity for attendees to exchange ideas and develop productive relationships.
- *Kick the Habit*. This campaign involved working with local Aboriginal communities to develop resources, including short films, posters and brochures, featuring local identities with messages encouraging their community members to quit smoking.

Elsewhere within the AH&MRC, the Anti-Tobacco Resistance and Control (A-TRAC) program continues to roll out a range of activities to address smoking in Aboriginal communities in NSW. The inaugural A-TRAC Symposium, held in Sydney in 2011, was the first State-wide gathering of its kind and enabled the Aboriginal community to showcase their most successful programs aimed at addressing tobacco resistance and control.

Research into Aboriginal health is steadily growing and places increasing demands on ACCHSs for participation at different levels. During 2011-12 the AH&MRC, through its Research Program, initiated a project to develop and improve the capacity within ACCHSs to initiate or respond to requests for research, by creating a tool to assist members with decision-making about their involvement in research. The AH&MRC is also called upon to support or participate in research projects, and as of 30 June 2012 the AH&MRC was actively involved in supporting 44 research projects with a further 16 proposed projects under consideration.

Finally, the Human Research Ethics Committee, which is auspiced by the AH&MRC, also continued to play an invaluable role in the promotion of high quality health research affecting Aboriginal people in NSW by ensuring that all research was conducted in an ethical manner and was consistent with all relevant guidelines.

### **To strengthen the capability and competence of the Aboriginal health workforce**

During the past year, the AH&MRC was busy laying the foundation for the future of the Aboriginal Community Controlled Health sector workforce. In August 2011, the Aboriginal Health College — which was founded by the AH&MRC in 2003 and achieved status as a Registered Training Organisation in 2004 — saw over 70 students graduate with Certificate III, IV, Diploma and Advanced Diploma qualifications, as well as a similar number of students with related Statements of Attainment. The Aboriginal Health College currently has over 380 student enrolments within the financial year 2011-12 in a mix of both short courses and courses offering full qualifications.

Supporting the workforce in ACCHSs, the AH&MRC held a number of gatherings in 2011-12 including:

- In March 2012, the AH&MRC facilitated a two-day workshop for Aboriginal mental health workers from ACCHSs and Local Health Districts on topic of "Collaborative Partnerships". Attended by more than 80 people from mental health and social and emotional wellbeing programs around the NSW, these workshops showcased successful examples of service delivery and collaborative

projects — all with the aim of helping to identify ways to move forward for the benefit of clients and communities.

- The ninth *NSW Aboriginal Drug and Alcohol Network (ADAN) Symposium* was convened by the AH&MRC in March. Ninety delegates attended the symposium, held in Coffs Harbour, where they shared information through presentations and discussed the many issues affecting the ADAN workforce and the Aboriginal communities they serve. This year, for the first time, ADAN presented Awards for Excellence and also established an ADAN "Hall of Fame".

**A great deal of attention and energy is being directed across all sectors to improve health outcomes for Aboriginal people**

- The fifth annual *AH&MRC GP Forum and Clinical Update* was held in August 2011. Supported by the NSW Rural Doctors Network, this event attracted 26 GPs and GP Registrars from 14 different ACCHSs throughout the State and included a mix of clinical updates and workshop sessions, as well as opportunities for ACCHS GPs to share information, experiences and ideas.

These are just some of the highlights from 2011-12.

The following pages of this *Annual Report* provide more detail about our range of activities aimed at meeting the aspirations of our members as outline in the AH&MRC's Strategic Objectives.

In many ways NSW is at the beginning of a new era, one in which a great deal of attention and energy is being directed across all sectors to improve health outcomes for Aboriginal people. We look forward to the commitment of the new and existing stakeholders to work in partnership with us to capitalise on that momentum.

**Sandra Bailey**



**Chief Executive Officer**

# The AH&MRC Board of Directors

## Mrs Christine Corby Chairperson

### North West

Mrs Corby is a Gamilaraay woman from north-western New South Wales (NSW). She was born in Sydney but later returned to her mother's country in Walgett, where she has lived for the past 37 years. Mrs Corby was the Legal Secretary for the NSW Aboriginal Legal Service for 11 years. When funding was announced in 1986 for the establishment of a local Aboriginal Medical Service in Walgett, she commenced in the role of CEO, a position she has held for 26 years. She also holds the position of CEO of Brewarrina Aboriginal Health Service Limited.

Mrs Corby is the Chairperson of the Aboriginal Health and Medical Research Council of NSW (AH&MRC), is one of the NSW representatives on the National Aboriginal Community Controlled Health Organisation (NACCHO) Board and also attends NSW Aboriginal Health Partnership meetings and NSW Aboriginal Health Forum meetings. She is also the Chairperson of Bila Muuji Aboriginal Health Service Incorporated (representing 11 member services of the AH&MRC) in the (former) Greater Western Area Health Service region.

Mrs Corby is a Justice of the Peace and holds a Graduate Diploma of Health Service Management, a Diploma of Management and a Diploma of Health Sciences. She was awarded the Order of Australia Medal in 2005, the Centenary Medal in 2003 and received the NSW Health Hall of Fame Award in Aboriginal Health in 2005. Mrs Corby's other board positions include:

- CEO of Walgett Aboriginal Medical Service since June 1986
- Chairperson of the Walgett Gamilaraay Aboriginal Community Working Party (WGACWP)
- Committee member of NSW Health Ministerial Advisory Committee (HMAC)
- Committee member of NSW Kids and Families Board
- Committee member of the Far West NSW Medicare Local Limited (FWML)

## Mr Craig Ardler Illawarra

Mr Ardler is the current CEO of the South Coast Medical Service Aboriginal Corporation (SCMSAC), a role he also held from 1999-2006. He has a wealth of experience in management, policy and community development with several organisations.

During his first term as CEO of SCMSAC, Mr Ardler helped grow the organisation from five staff and an annual turnover of \$275,000 to 35 employees and a turnover of \$3.7 million, and played a key role in rolling out many new and urgently required services to the local Aboriginal community.

Mr Ardler has also worked for the Wreck Bay Aboriginal Community Council as Policy and Liaison Manager, and he was recently employed within the Australian Public Service as a Legal and Education Officer through the Department of Sustainability, Environment, Water, Population and Communities at Booderee National Park.

Mr Ardler's other current board positions include Chairman of the Booderee National Park Board of Management and Chairman of the Wreck Bay Aboriginal Community Council, where he has been elected to many executive roles since 1989.

## Ms Dea Delaney-Thiele Metropolitan

Ms Delaney-Thiele is a very proud Dunghutti woman born at the Burnt Bridge Mission in Kempsey, NSW. She has more than 20 years' experience working within the Aboriginal Community Controlled Health sector.

Ms Delaney-Thiele is the current AH&MRC Metropolitan Regional Director, a position she also held from 1994-2000. She is also currently the Regional Coordinator for the Healthy Lifestyles Program at the Aboriginal Medical Service, Western Sydney. Ms Delaney-Thiele was the previous Chief Executive Officer of the National Aboriginal Community Controlled Health Organisation (NACCHO), where she was responsible for the management of the national Secretariat. She is also a Board Member of the

Deerubbin Local Aboriginal Land Council. Other positions and representations held by Ms Delaney-Thiele over the years include: the NSW representative to NACCHO (1994-1997); member on the NSW Aboriginal Mental Health Advisory Committee (1995); representative on the NSW State Partnership Forum (from 1996); Chairperson of the Kamaku Building Enterprises Aboriginal Corporation (since 1996); and Chairperson of the Murawina Mt Druitt Aboriginal Childcare Centre in Sydney.

Ms Delaney-Thiele was Deputy CEO and CEO of Daruk Aboriginal Community Controlled Medical Service Co-op Ltd (now AMSWS) and has been a member of many other Aboriginal organisations, such as AMS Redfern, Deerubbin Local Aboriginal Land Council, Aboriginal Housing Co-op Redfern, Winnunga Nimmityjah in Canberra and the AH&MRC Ethics Committee.

Ms Delaney-Thiele served on the Board of Directors for the Western Sydney Area Health Service (1996-2000) and the New Children's Hospital in Westmead (1995-2000). She is a member of the Australian Institute of Company Directors and has been a member of the Australian College of Health Service Executives since 1997.

### **Ms Pam Handy** **Far West**

Ms Handy was born in Brewarrina, NSW. Her parents are from Brewarrina/Walgett, but as a child she moved to the lands of the Barkindji (river people) on the Murray and Darling Rivers near Dareton-Coomealla. There she completed the Higher School Certificate before beginning her career in a number of administration, education and training positions in a range of school, TAFE, public service and community organisations.

Over the years, Ms Handy has held numerous roles. She worked as a secretary with the Wee Waa Local Aboriginal Land Council and as a youth worker with the Brewarrina Shire Council, and also held teaching and supervisory positions at various organisations, including the Western College of Adult Education in Dubbo and the University of Technology in Sydney.

Ms Handy was appointed President of the Orana Regional Council of Adult and Community Education and also represents the Orana Region in education at the national level.

Ms Handy moved back to Wee Waa in 1993 to take up a dual-role as Manager of the Narrabri/Wee Waa Community Development Employment Program (CDEP) and also as the Community Trainee Training Officer.

Ms Handy was CEO of Coomealla Health Aboriginal Corporation from 1995-2002, which included administration

of the Balranald Aboriginal Health Service in 2002, and she also managed Brewarrina Aboriginal Health Service Limited for a brief period in 2003. Ms Handy was appointed as the AH&MRC's Far West representative in 2011. She has also served as the Aboriginal Community Liaison Officer for the Dareton, NSW Police Force from 2006-2012.

Ms Handy is currently the CEO of Dareton Local Aboriginal Land Council, having previously held the position of Chairperson from 2006-2010.

### **Mr Tim Horan** **Central West**

Mr Horan is new to the health scene, having spent 20 years with the NSW Police. He has been involved in supporting local communities for many years and is committed to the people of western NSW, particularly those communities that are socially disadvantaged. Mr Horan has been a Councillor on Walgett and Coonamble Shire Council, and has served as Mayor of Coonamble Council since March 2004.

Mr Horan was employed by the Coonamble Aboriginal Health Service as the CEO in August 2008 and has helped drive the new service forward, guiding the organisation as it provides vital health services to the area and contributes to *Closing the Gap* initiatives.

### **Mrs Val Keed** **Lower Central West**

Mrs Keed was born in Peak Hill, NSW and is descended from a long line of proud Wiradjuri people in this area. She was a founding member of the AH&MRC since its establishment (initially as the Aboriginal Health Resource Committee) in 1985. Mrs Keed has held the position of AH&MRC Lower Central West Regional Director on many occasions over the years, most recently having been re-elected in 2009.

Mrs Keed is currently the Chairperson of the Peak Hill Aboriginal Medical Service. She is also involved in many community-based organisations in the region, including the Peak Hill Local Aboriginal Land Council, Warramunga Aboriginal Advancement Co-operative, Mid Lachlan Aboriginal Housing Management Association, Weigelli Drug and Alcohol Centre (Cowra) and the National Parks Peak Hill/Bogan River Aboriginal Reference Group.

As an AH&MRC Director, Mrs Keed also holds the Chairperson position on the AH&MRC Ethics Committee and is a nominated delegate to the National Aboriginal Community Controlled Health Organisation (NACCHO). As well as her local commitments, Mrs Keed also represents the AH&MRC and NACCHO on various state and national steering committees.

## Mr David Kennedy

### North Coast

Mr Kennedy is an Eora man with family ties in the Gumbainggirr Nation on the North Coast of NSW. He is the current Chair of the Many Rivers Aboriginal Medical Service Alliance, an alliance of 10 Aboriginal Health Services on the North Coast of NSW.

Mr Kennedy is a former Director and former Deputy Chairperson of the Coffs Harbour and District Local Aboriginal Land Council. He is also a member of numerous regional and Local Health District committees.

Mr Kennedy is the current Chair of the Mid North Coast Local Health District *Closing the Gap* Subcommittee and is a current Board member on the Mid North Coast Local Health District Governing Council. He is also a member of the Regional Aboriginal Chronic Disease Program Management Committee, the Many Rivers AMS Alliance Healthy for Life Consortium (as Chair), the Aboriginal Maternal Infant Health Strategy Steering Committee and the Department of Aboriginal Affairs Regional Engagement Group.

## Ms Selena Lyons

### Riverina

Ms Lyons is a proud Wiradjuri woman, originally from Narrandera within the Riverina, who has worked in management roles in both Aboriginal community controlled organisations and government agencies for the past 24 years. She worked with the Department of Health and Ageing in Canberra as Manager of the Indigenous Health ACT Office; Winnunga Nimmityjah Aboriginal Health Service in Canberra as Operations Manager; and Centrelink as Manager, Indigenous Services Area – South West.

Ms Lyons is the CEO of the Riverina Medical and Dental Aboriginal Corporation, a position she has held since March 2010, and has been a Director on the AH&MRC's Board of since October 2011. She has a Diploma in Practice Management; Certificate IV in Medical Administration; Diploma in Legal Advocacy; and Certificates in Small Business Management, Office Management Skills and Project Fundamentals.

## Ms Rochelle Patten

### Murray River

Ms Patten is a proud Yorta Yorta woman and a founding member the AH&MRC. She is the current Chairperson of the Cummeragunja Housing and Development Aboriginal Corporation.

Ms Patten holds a Masters in Environmental Studies from Deakin University, as well as a Welfare Assistants

qualification from Watsonia Institute in Victoria. She has had a long involvement in several Aboriginal community organisations, including the Victorian Aboriginal Legal Service, Victorian Aboriginal Child Care Agency, the Victorian Aborigines Advancement League (through its Aboriginal Women's Refuge) and the Cummeragunja Building Program.

Ms Patten is a member of the Yorta Yorta Nations Incorporated and the Yembeena Education Centre, and also currently sits on the Koori Court in Shepparton, Victoria.

## Mrs Cathie Sinclair

### Central Coast

Mrs Sinclair is the Chief Executive Officer of the Eleanor Duncan Aboriginal Health Centre and has worked with the Aboriginal Community Controlled Health sector for 12 years. She is a qualified Audiometrist, has a Diploma of Community Management and was a Teacher's Assistant at the Boori Minimbah Homework Centre in 1994-95.

Mrs Sinclair is the Chairperson of Muru Aboriginal Corporation; a founding member of local Aboriginal Student Support and Parent Awareness (ASSPA) Committee; a member of Aboriginal Interagency for Central Coast; the Miring Aboriginal Women's Group; the Central Coast Aboriginal Community Consulting Group; the Local Aboriginal Land Council; the Mingaletta Aboriginal Community Organisation; the Central Coast Aboriginal Community Congress; the NSW Aboriginal Health Priority Taskforce; and a former member of the AH&MRC Ethics Committee.

## Mrs Donna Taylor

### Central Tablelands

Mrs Taylor is a proud Murri woman from the Kamilaroi Nation, born and raised in Moree, Northern NSW. After completing High School in Moree, Mrs Taylor started her career as a secretary to Mr Lyall Munro, who was an executive member of the National Aboriginal Conference (NAC) in the early 1980s.

Mrs Taylor has worked for Pius X Aboriginal Corporation for the past 20 years, commencing as a trainee bookkeeper and now in the role of CEO. She has also served as a representative on the Moree Health Service Advisory Committee and the Roy Thorne Rehabilitation Committee.

## Vacant

### Far South Coast



# Member Services Support Unit

## What We Achieved in 2011-12

We were active in strengthening the capacity of Aboriginal Community Controlled Health Services to deliver primary health care services to the Aboriginal clients, families and communities they serve.

THE PRINCIPAL AIM OF THE AH&MRC'S MEMBER Services Support Unit is to strengthen the capacity of our members, Aboriginal Community Controlled Health Services (ACCHSs), to plan, manage and deliver primary health care services that respond to the needs and aspirations of the Aboriginal clients, families and communities they were set up to serve.

The Member Services Support Unit combines various funded positions and roles which are specific to supporting ACCHS operations. The structure of the Member Service Support Unit provides each member ACCHS with a dedicated contact person and other resources that enable services to respond in a timely and effective manner as issues arise.

In 2011-12, the AH&MRC's Member Service Support Unit continued to deliver high quality practical and technical support to our members across a broad range of areas of organisational development, including workforce initiatives, advice on General Practitioner (GP) and GP Registrar recruitment and retention, information and communication management technology, and accreditation/quality improvement support.



## Workforce

**Our role:** There are a range of programs within the AH&MRC that incorporate workforce development as a means of improving the training, recruitment and retention of appropriately skilled health professionals in NSW ACCHSs.

This year's achievements include:

- *The National Aboriginal and Torres Strait Islander Health Worker Project.* The AH&MRC's NSW Workforce Initiatives Project Officer (WIPO) took part in the national consultation workshops for the National Aboriginal and Torres Strait Islander Health Worker Project and contributed to the finalisation of the project report. Other participants included Health Workforce Australia, the National Aboriginal Community Controlled Health Organisation (NACCHO) and the Department of Health and Ageing (DoHA), as well as several WIPOs from other jurisdictions.
- *GP NSW and AH&MRC Close the Gap Workshops.* The AH&MRC Collaborated with GP NSW for the first time to organise *Close the Gap* workshops in Sydney, aimed at Outreach Workers, Aboriginal Health Workers, Practice Managers and *Close the Gap* workers. Held on 17-18 August 2011 and 14-15 March 2012, these workshops examined the relationship between the two sectors and explored ways of developing better relationships on the ground.
- *Aboriginal Employment Program.* The Department of Education Employment Workplace Relations (DEEWR) has provided funding for the development of a

Aboriginal Employment Program (AEP) for NSW ACCHSs. The project includes a scoping study to assess recruitment/retention issues for existing positions, and this will provide the evidence for the development of an AEP. The project is being completed by Kaylie Harrison from the AH&MRC's Member Services Support team.

- *Bourke Health Career Days.* The AH&MRC WIPO collaborated with Broken Hill University's Department of Rural Health, the

University of Sydney and Bourke Aboriginal Health Service to hold a series of *Health Career Days* for students at Bourke High School.

- The AH&MRC WIPO organised the development of a range of recruitment and retention resources for *Health Career Day* expos, including flyers, t-shirts and wristbands. A DVD was also produced showcasing the health career activities at Bourke Aboriginal Health Service and Bourke High School. ▶

In 2011-12, the AH&MRC Member Service Support Unit continued to deliver high quality practical and technical support to our members



Left & above: Students attend a health career day hosted by the AH&MRC

- Member Services Support helped to develop USB sticks containing health career, health promotion, accreditation and mentoring information films. These USB sticks were provided to all ACCHSs and also distributed to NACCHO and throughout the WIPO Network. Health career information and health promotion films are now shown in waiting rooms of ACCHSs for the benefit of the community.
- The AH&MRC WIPO produced a 60-second TV commercial which ran on both Imparja Television and Go! Television, which promoted recruitment opportunities on behalf of NSW ACCHSs.
- The Member Services Support Unit developed and regularly updated Aboriginal Health Worker-relevant information on the AH&MRC website, including updates about the National Aboriginal and Torres Strait Islander Health Worker Association (NATSIHWA) and information on the national registration of Aboriginal and Torres Strait Islander Health Workers.
- Staff from the Member Services Support Unit attended careers expos at several different locations in NSW, including Bourke High School, Toronto High School, Richmond High School, Alexandria High School and Shellharbour Sports Stadium, where they promoted Aboriginal health career opportunities to high school students.
- The AH&MRC WIPO assisted with the development of the *Aboriginal Community Controlled Health Sector Complimentary Workforce Plan: 2011-2015*. Incorporating key priority areas from the *National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework*

(NATSIHWSF) 2011-2015, the plan sets the priorities for NSW and other jurisdictions, and will direct the planning of national WIPO activities over the next five years.

## General Practice Education & Training

**Our role:** The General Practice Education and Training (GPET) project at the AH&MRC assists with the development of the medical workforce in ACCHSs. The AH&MRC encourages the use of its member services to provide quality training in Aboriginal health for GP Registrars. The AH&MRC is represented on the GPET Aboriginal and Torres Strait Islander Health Training Reference Group and supports the national roll-out of GP Registrar Training Programs within ACCHSs. This year's achievements include:

- The number of GP Registrars in NSW ACCHSs remained static in 2011-12, however many sites are now accredited to become training posts. The GPET project officers continued to assist member services to promote and advertise their services as meaningful employment destinations for General Practitioners and GP Registrars.
- The AH&MRC actively promoted opportunities for member services to capitalise on scholarships for medical student placements, which are designed to inspire early interest in Aboriginal health training and encourage the recruitment of future GPs. These opportunities included working directly with the University of Western Sydney to help place medical students in rural ACCHSs.



Students attend a health career day hosted by the AH&MRC, Broken Hill University's Department of Rural Health and Bourke Aboriginal Health Service



Rugby League legend Rhys Wesser visits the AH&MRC stand at the Indigenous Jobs Expo, held at Shellharbour City Stadium in November 2011

- The Member Support Services team continued to promote ACCHSs as employment destinations of choice for GP Registrars in NSW. Representatives from the AH&MRC presented at the GPET National Convention in Canberra in September 2011, where they detailed the challenges involved in achieving the aims of the GPET project, including lack of appropriate GP supervision models for member services and the need to develop and remunerate cultural education and mentoring services that are provided by ACCHSs staff or community members.
- The third annual *GP Issues Workshop*, held in partnership with the NSW Rural Doctors Network (RDN), took place on December 13, 2011. Attendance was made up of ACCHSs staff (including CEOs, GPs and Practice Managers), external GP Registrars and medical student training staff.
- *RDN and AH&MRC Partnership and Workplan*. The AH&MRC and the RDN continue to build on the existing Workplan and further develop their partnership. The Workplan between both organisations was revised regularly throughout 2011-12, and the RDN continued to support the annual GP Issues Workshops.
- The AH&MRC and RDN continue to hold annual CEO meetings to review the previous 12 months and plan for the future direction of the partnership. The AH&MRC is involved in the promotion of ACCHSs as training sites to Medical Students participating in RDN programs. The AH&MRC also has been involved in the development and promotion of material designed to recruit GPs to ACCHSs, while the RDN continues to work with and support NSW ACCHSs through a number of initiatives and programs.
- The NSW ACCHSs Practice Managers Network (PMN) continues to make strong progress, and currently has membership of approximately 37 ACCHS practice managers and/or related staff.
- The Second PMN Meeting was held in Sydney on 14 December 2011 and was attended by 25 ACCHSs staff. 71% of attendees graded the sessions as 'very good' or 'excellent', while 100% of those who filled out evaluation forms stated they would like a similar meeting held again in 2012.

## Information and Communication Technology/ Information Management

**Our role:** The AH&MRC was funded by the Office for Aboriginal and Torres Strait Islander Health (OATSIH) to review Information and Communication Technology/ Information Management (ICT/IM) practices across the NSW Community Controlled Health sector in 2011-12. This year's achievements include:

- Member Services Support provided support and assistance to ensure that ICT/IM standards are in alignment with accreditation standards for NSW ACCHSs and related services.
- The AH&MRC assumed a significant role in the construction, dissemination and implementation of an Information Management Strategic Plan for the sector. An Information Management Reference Group (IMRG) was appointed to share expertise and provide advice on the development of the Plan. A facilitator was engaged to ensure that the IMRG maintains a target of key deliverables for the project. The Plan is now in the final stage of development and is expected to be endorsed in September 2012. Implementation of the endorsed strategic plan is expected to begin late 2012.
- The Commonwealth Department of Health and Ageing, the NSW Ministry of Health (Centre for Aboriginal Health) and the AH&MRC have agreed to work in partnership, through the Aboriginal Health Forum, for the improvement of ICT/IM capabilities of NSW ACCHSs and related services. Over

the past 12 months, a number of business cases were submitted for server infrastructure upgrade and replacement, integration of Regional Information Training Officers (RITOs), and transitioning of information management systems. With the assistance of the funding bodies (OATSIH, DoHA and NSW Ministry of Health), several sites have been significantly upgraded. Transitioning of information management systems has been successfully achieved and three new regional positions have been established for training support.

- The AH&MRC continues to support member services to further enhance improvements for our regions. In total, nearly \$2.5 million in federal and state government funds was distributed directly to ACCHSs for server infrastructure upgrades and replacement and transitioning of information management systems.

- The AH&MRC continues to work with the Centre of Oral Health Strategy in identifying needs for our member services across NSW including oral health services, dental chairs, X-ray equipment and manpower resources. With the assistance of the Centre of Oral Health Strategy (COHS) a number of our member services have greatly benefited. Other initiatives have included work with the Information System for Oral Health (ISOH) program, specifically assisting with the integration of ISOH into existing information management packages used by NSW ACCHSs.

## Accreditation

**Our role:** The AH&MRC provides support (via the Project Officer for Accreditation) to assist ACCHSs with accessing relevant information, support and funding required in seeking accreditation against appropriate frameworks. The standards frameworks considered the most relevant to ACCHSs are: the Royal Australian College of General Practice (RACGP) standards; Quality Improvement Council of Australia (QIC) standards; Australian Council on Health Care Standards (ACHS) EQulP4 standards; and International Organisation for Standardisation AS/NZS 9001:2008 Quality Management Systems Requirements (ISO). This year's achievements include:

- Accreditation support was provided by the Member Services Support Unit's Accreditation Team in the form of site visits, telephone

Nearly \$2.5 million in government funds was distributed ACCHSs for technology upgrades and replacement systems

and email consultations, and one-on-one activities — all tailored to the specific needs and requirements of services to ensure success in their efforts to achieve accreditation and maintain it through each accreditation cycle. Accreditation activities also included presentations and attendance at regional workshops.

- The Member Services Support Unit's Accreditation Team continued to support AH&MRC member services in seeking both clinical and organisational accreditation under the

Establishing Quality Health Standards Continuation (EQHS-C) measure, a Commonwealth initiative which provides support to overcome essential barriers to achieving accreditation/certification under specified healthcare standards.

- The Accreditation Team took part in the Lead Auditors Foundation training course on 7-11 November 2011. Team members were successful in completing the examination and are now qualified by the International Register of Certified Auditors as Quality Management Systems Auditors.
- The AH&MRC Accreditation Team worked closely with NACCHO and others to inform and implement the *Accreditation Sector Support Strategy*. This effort culminated in the planning and hosting of the *AH&MRC Accreditation Workshop*, scheduled to take place in Sydney in July 2012.
- The AH&MRC received funding to support ACCHS staff to build capacity and retain knowledge in the sector by becoming qualified reviewers under the QIC framework, which will enable Quality Management Services (QMS), a provider of assessment and training in accreditation frameworks for health and community services, to perform reviews that are handled in a culturally sensitive manner.
- The Accreditation Team and Griffith AMS gave a joint presentation at the *Lowitja Institute National Conference on CQI*, held on 14-15 May 2012 in Alice Springs. At the conference, representatives from both organisations spoke about the



Some of the many resources and promotional materials produced by the AH&MRC Member Services Support Unit in 2011-12

successful journey Griffith AMS made to achieve accreditation under the QIC framework, offering a great deal of practical advice to attendees from across the entire health services sector.

## The Corporate Governance Project

The AH&MRC's Corporate Governance Project was funded by OATSIH to examine governance arrangements in ACCHSs in NSW. Five NSW ACCHSs with different corporate structures participated in the project and representatives from many other services and organisations were also consulted. The findings were summarised in an AH&MRC-produced

report, entitled *Everything Goes Great Until There's a Problem — Corporate Governance in Aboriginal Community Controlled Health Services in NSW: The Theory and The Practice*. The report makes several recommendations, which if accepted and funded, will see the AH&MRC become more active in supporting good governance practice across the Aboriginal Community Controlled Health sector in NSW.

Consistent with the issues outlined in the *Everything Goes Great Until There's a Problem* report, the AH&MRC has continued to provide vital support services to our members in the area of governance. This support will be further enhanced with the commitment of specific funding via the Sector Governance Network (SGN) program, which is in its early stages but is due to be rolled out in 2012-13. 🖐️



# The Aboriginal Health College

THE ABORIGINAL HEALTH COLLEGE IS THE RESULT OF a long-term vision of the AH&MRC to establish and maintain an Aboriginal community controlled educational institution to provide culturally appropriate accredited education courses in Aboriginal health.

In pursuit of this vision, the AH&MRC Board endorsed the establishment of the College in 2002, and Registered Training Organisation (RTO) status was achieved in 2004.

Since then, the Aboriginal Health College has successfully

delivered accredited educational programs in several areas, including primary health care, sexual health, social and emotional wellbeing, alcohol and other drug work, management/governance, training and assessment, and cultural awareness, as well as a broad selection of short courses.

The Aboriginal Health College's small but dedicated team have worked tirelessly to produce consistent results and to provide a quality service. We continue to strive for further

improvement in our efforts and to achieve all of the four objectives set by the Board upon the establishment of the College.

All of our key work and effort clearly and distinctly falls within the four key areas assigned by the Board at the Aboriginal Health College's inception:

1. **INCREASE** the number of Aboriginal health professionals who possess qualifications relevant to the needs of clients serviced by Aboriginal Medical Services (AMSs) and by the NSW Ministry of Health. These qualifications will span entry-level qualifications (at Certificate III) through to university degrees and diplomas, for Aboriginal health workers, nurses and allied health professionals.
2. **DEVELOP** the professional skills of managers, supervisors and finance administrators working within AMSs. These employees have to respond to the new and emerging requirements relating to business management, information management, accountability, planning, and external linkages and coordination.
3. **STRENGTHEN** the governance capabilities of elected Aboriginal community controlled boards and governing committees. There are tangible pressures on elected Aboriginal community members to respond to legislative, regulatory and contractual obligations; to provide strategic leadership to their organisations; and to articulate community needs and expectations.
4. **PROVIDE** professional development opportunities to non-Aboriginal health professionals working with Aboriginal clients, families and communities. The principal occupational categories are general practitioners, nurses and allied health professionals.



## What We Achieved in 2011-12

We continued to place Aboriginal health education in Aboriginal hands.

2011-12 was another year of “steady as she goes” for the Aboriginal Health College. Having added several courses to our scope after achieving re-accreditation at the end of the 2010-11 financial year, the Aboriginal Health College transitioned smoothly from being regulated by the NSW Vocational Education and Training Accreditation Board to the new national body, the Australian Skills Quality Authority.

Throughout the year, the Aboriginal Health College continued to make progress in relation to the four Focus Areas and Objective listed in the *AH&MRC Strategic Plan 2011-14* by:

- Assisting **self-determination** through the professional development and education of key staff and board members within Aboriginal communities;
- Building **relationships** with funding

bodies, member services, other AH&MRC business units and funding and strategic partners;

- Enhancing **workforce development** through capacity building by providing beginning and continuing education of the workforce; and
- Assisting **health services and programs** through workforce and board education.



## Key Activities and Accomplishments

- In August 2011, the Aboriginal Health College honoured over 70 graduates from 2010-11 Certificate III, IV, Diploma and Advanced Diploma qualifications, as well as a similar number of students with related Statements of Attainment, in the presence of Her Excellency Professor Marie Bashir AC CVO, Governor of New South Wales and several other honoured guests.
- The Aboriginal Health College currently has over 380 student enrolments within the financial year 2011-12 in both short courses and courses which offer full qualifications.
- In 2011-12 the Aboriginal Health College again reached enrolment capacity for the year for Certificate III and Certificate IV Aboriginal and/or Torres Strait Islander Primary Health Care courses. Enrolment for courses in social and emotional wellbeing, alcohol and other drug work, and counselling remained strong, as did training and assessment qualification enrolments. Interest in management courses improved from the previous year, and the Aboriginal Health College fielded many enquiries in relation to the newly added Certificate IV in Business Governance qualification.
- The Aboriginal Health College began or continued the development of a range of specific short courses in relation to: Eye Health; Ear and Hearing Health; Aboriginal Sexual and Reproductive Health; Child and Maternal Health; Sexually Transmitted and Blood-Borne infections; and Tobacco Control and Cessation. We completed our preliminary work on the Diploma of Enrolled Nursing course and have since submitted it for accreditation with the Australian Nursing and Midwifery Council.
- The Aboriginal Health College maintained its quality assurance and accountability processes by undertaking an internal audit, which also assisted the College to comply with the NSW Department of Education and Training funding regulations and helped maintained its State Approved Provider Listing requirements. The College also made significant improvements in processing and compliance for ABSTUDY's Away from Base (AFB) program.



Left & right: 2011 Graduates of the AH&MRC Aboriginal Health College

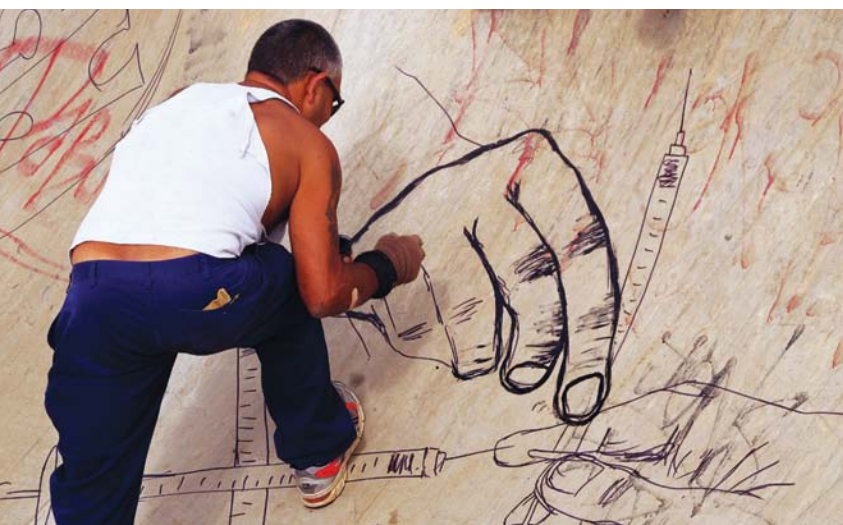


- The Aboriginal Health College maintained and re-affirmed its relationship with the Health Sciences faculty at the University of Wollongong. Articulation arrangements are now in place, recognising the Aboriginal Health College as a partner and granting credit to students who have studied with us, leading to advanced credit arrangements. The first Advanced Diploma graduates are continuing with their degree studies after gaining 1.5 years in credit transfers. The second cohort of students is now progressing along a similar pathway.
- Staff from the Aboriginal Health College networked effectively with affiliate RTOs in NSW and other states through the Aboriginal and Torres Strait Islander Health Registered Training Organisation National Network (ATSIHRTONN). The Aboriginal Health College team also provided key input into the review of national learning resources and the development of the registration process for Aboriginal primary health workers. In addition, experts from the Aboriginal Health College also contributed to key consultations regarding the Aboriginal primary healthcare workforce, particularly in relation to education and training. Aboriginal Health College staff also contributed to a report on the funding needs for Aboriginal RTOs and a review of alcohol and other drug courses provided in Australia.
- Educators at the Aboriginal Health College taught and assessed students in a range of courses, including: Primary Health

Management and Governance; Counselling; Alcohol and Other Drug Work; Mental Health Work; Eye Health; Ear and Hearing Health; and Primary Health Care.

- Cultural Awareness education was a popular course in 2011-12, with the Aboriginal Health College delivering this training to several industry partners and other organisations, both public and private. The course was well-received by all who attended, and the Aboriginal Health College is currently seeking Continuing Professional Development (CPD) points for this course from The Royal Australian College of General Practitioners (RACGP).
- Student satisfaction surveys for 2011-12 rated the Aboriginal Health College as 'very high' on quality, relevance, assessment, resources and support. The average student satisfaction ratings ranged between 69% and 74%, and employers who sent students to the College for training rated their satisfaction as between 54% and 64%; overall student satisfaction was 72% and overall employer satisfaction was 54%.

- The Aboriginal Health College increased its student intake and the number of courses delivered to the Aboriginal social and emotional wellbeing (mental health) sector of the workforce. Staff from the College provided input to the planning of the National Aboriginal and Torres Strait Islander Social and Emotional Wellbeing Conference and also undertook a state-wide training needs analysis. The Aboriginal Health College also facilitated the 12th Bringing Them Home Counsellors Forum, resuming this role after a hiatus in delivery.
- As a venue, the Aboriginal Health College played host to a range of important national, state and local meetings and collaborations in 2011-12. Events held at the Aboriginal Health College this year included meetings of the Coalition for Research to Improve Aboriginal Health (CRIA) and the *Health and Wellbeing Forum*, a key part of the consultation process for the New South Wales Government's 10-Year Aboriginal Health Plan for NSW. 🖐️



# Public Health

## What We Achieved in 2011-12

We continued to assist Aboriginal Community Controlled Health Services to deliver a range of health programs and services that are effective, sustainable and reflect local Aboriginal community needs.

THE AH&MRC PUBLIC HEALTH TEAM WORKS CLOSELY WITH ABORIGINAL Community Controlled Health Services (ACCHSs) to develop and deliver public health programs that aim to improve the health of Aboriginal people in NSW.

In 2011-2012, AH&MRC public health programs were delivered in the following areas:

- Blood borne viruses and harm minimisation
- Cancer
- Child and maternal health
- Chronic disease
- Continuous quality improvement
- Drug and alcohol
- Mental health
- Sexual and reproductive health
- Tobacco resistance and control

In addition to delivering specific public health programs, in 2011-12 members of the AH&MRC Public Health Team continued to provide advice and input into a broad range of public health activities, and to work with both government and non-government organisations to inform national and NSW policy development. Aboriginal public health education and training was also supported at the AH&MRC through the provision of training placements.



Children take part in the award-winning *Where's the Shame, Love Your Liver* campaign at Tharawal AMS

## Child and Maternal Health

**Our role:** The AH&MRC's Child and Maternal Health Program supports the planning, development, implementation and evaluation of Aboriginal child and maternal health programs. The program strives to build service capacity at ACCHS and enhance coordination and linkages between all sectors focused on Aboriginal child and maternal health, and has been funded by the NSW Ministry of Health. This year's achievements include:

- The AH&MRC provided representatives for a range of NSW advisory group and committees relating to Aboriginal child and maternal health. The AH&MRC received funding from the NSW Rural Doctors Network to deliver four regional child and maternal health workshops for ACCHS staff in Orange, Balranald, Casino and Walgett. The workshops were tailored to the needs of ACCHSs and covered clinical information on high risk pregnancy; client information to support alcohol use during and after pregnancy; client information to support substance use during and after pregnancy; and strategies to support clients in social and emotional wellbeing. A report on the views and experiences of ACCHSs regarding child and maternal health services was provided to the NSW Ministry of Health.
- Funding for the AH&MRC Child and Maternal Health Program ceased in December 2011, and a proposal for funding to continue this program is under consideration.

# Sexual & Reproductive Health

**Our role:** The AH&MRC currently has a number of programs addressing sexual and reproductive health. These programs aim to support Aboriginal sexual health workers and other workers to develop and implement programs. The focus is on prevention and early intervention, particularly with young Aboriginal people. Our programs work closely with the Aboriginal STI, HIV and Hep C Workers Network and the Aboriginal Sexual and Reproductive Health Workers Network. This year's achievements include:

- The *It's Your Choice Have a Voice: Rights, Respect and Responsibility* campaign aimed to empower young Aboriginal people to make informed choices about sexual and reproductive health, as well as related alcohol and other drug (AOD) issues. Over the course of 2011, the campaign was rolled out to 14 communities in NSW and reached some 4,000 young people aged 12-19 years. The campaign included hip-hop workshops, music workshops, salsa workshops and *Deadly Styles* dance performances. Events were hosted in partnership with Indigenous Hip-hop Projects (IHHP), local ACCHSs and Local Health Districts (LHDs). Other key partners in rolling out the campaign were Aboriginal Sexual and Reproductive Health Workers and other Aboriginal Health Workers based in ACCHSs. The AH&MRC provided pre-campaign workshops, support during implementation and moderation of social media over the reporting period. The AH&MRC also coordinated and facilitated three network meetings for participating Aboriginal Sexual and Reproductive Health Workers to discuss program development, resources and professional development opportunities. The *It's Your Choice Have a Voice* campaign was evaluated in 2012 and judged to have met all key performance indicators. The campaign has been refunded for another two years.
- In June 2012, the AH&MRC launched an online resource for Aboriginal STI, HIV and Hepatitis Workers (ASHHWs) called the *ASHHWN Toolbox* ([www.ashhwntoolbox.org.au](http://www.ashhwntoolbox.org.au)). *ASHHWN Toolbox* is a large collection of resources for ASHHWs that features research, details of relevant government policies and strategies, as well as contact details and other information for members of the Aboriginal STI, HIV and Hepatitis Workers Network. The AH&MRC also provides other forms of support to ACCHSs in regard to sexual health programs; for example, the AH&MRC



distributed over 20,000 condoms to member services during 2011-12.

- During the reporting period, the AH&MRC coordinated data collection from young Aboriginal people at key cultural events, such as the Yabun Festival and the Aboriginal Rugby League Knockout, about their sexual health behaviours and knowledge. This data is part of a three-year national study on the topic of “Sexual health and relationships in young Indigenous people” being conducted by the Kirby Institute and NACCHO affiliates.
- The AH&MRC continues to Chair the Aboriginal STI, HIV and Hepatitis Advisory Committee (ASHHAC), a multidisciplinary committee that advises the NSW Ministry of Health on sexual health and blood borne virus policy, project and program



development for Aboriginal people in NSW. Key partners associated with the AH&MRC sexual health program include the Aboriginal STI, HIV and Hepatitis Workers Network (ASHHWN), the Australasian Society for HIV Medicine (ASHM) and ACON, Australia’s largest community-based gay, lesbian, bisexual and transgender health and HIV/AIDS organisation.

- In 2011-2012, the AH&MRC developed and administered a scholarship program to support

ACCHS doctors and nurses to participate in Family Planning NSW training courses. With funding from the NSW Ministry of Health, 15 doctors and nine nurses from 12 different ACCHSs were supported to attend certificate and short courses in sexual and reproductive health. In addition, 40 sexual and reproductive health resource kits from Family Planning NSW were purchased for distribution to member ACCHSs to support their work with local communities.



# Drug and Alcohol

**Our role:** The Aboriginal Drug and Alcohol Network (ADAN) was established in 2003 as a result of a recommendation from the *Talking About Grog* summit held in 2002. ADAN membership is comprised of Aboriginal Drug and Alcohol Workers from ACCHSs, Local Health Districts and Non-Government Organisations from across NSW. This year's achievements include:

- ADAN hosted the ninth annual *ADAN Symposium* in March 2012 in Coffs Harbour. A record number of 90 delegates attended. The two-and-a-half day symposium featured several presentations from ADAN members and provided many opportunities for attendees to discuss issues affecting the ADAN workforce and Aboriginal communities. This year, for the first time, ADAN hosted Awards for Excellence, as well as establishing an ADAN Hall of Fame.
- The ADAN Leadership Group continued to meet quarterly to provide advice to the NSW Ministry of Health, the Office for Aboriginal and Torres Strait Islander Health (OATSIH) and other agencies about policies, resources and programs affecting Aboriginal communities across NSW. The ADAN Leadership Group also developed the *ADAN Symposium* agenda, and assisted with the organisation and facilitation of the event.
- In June 2011, the ADAN Leadership Group participated in training on the Indigenous Risk Impact Screen (IRIS) screening tool, the only culturally validated tool that screens for alcohol and other drug issues, as well as social and emotional wellbeing. It is anticipated that the ADAN Leadership Group will facilitate regional workshops on IRIS for other ADAN members.
- Approximately 30 ADAN members (including eight positions funded by the AH&MRC) attended the second *National Indigenous Drug and Alcohol Conference* (NIDAC), held in Fremantle, Western Australia. Approximately 10 workers presented on topics including the *Deadly Shots 2* project and "The ADAN Model". Members also participated in panels and discussions. One ADAN member won a National Award of Excellence and another was instated into the inaugural NIDAC National Honour Roll.
- The AH&MRC continues to co-chair the Aboriginal Drug and Alcohol Subcommittee and also holds membership on the NSW Ministry of Health Drug and Alcohol Program Council, which has direct input into NSW Ministry of Health policy, strategies and state health initiatives. The AH&MRC is also represented on a number of other NSW Ministry of Health committees.



Members of the Aboriginal Drug and Alcohol Network (ADAN) Leadership Group



Held in March 2012, the ninth annual ADAN Symposium in Coffs Harbour attracted a record number of 90 delegates

# Blood Borne Viruses & Harm Minimisation

**Our role:** The AH&MRC has several programs that address blood borne viruses and harm minimisation. The focus of the programs is on preventing the transmission of blood borne viruses, particularly among young Aboriginal people, by encouraging access to health services and promoting harm minimisation strategies.

All of our programs include building the capacity of AH&MRC member ACCHSs to respond to blood borne virus prevention, management and treatment. This year's achievements include:

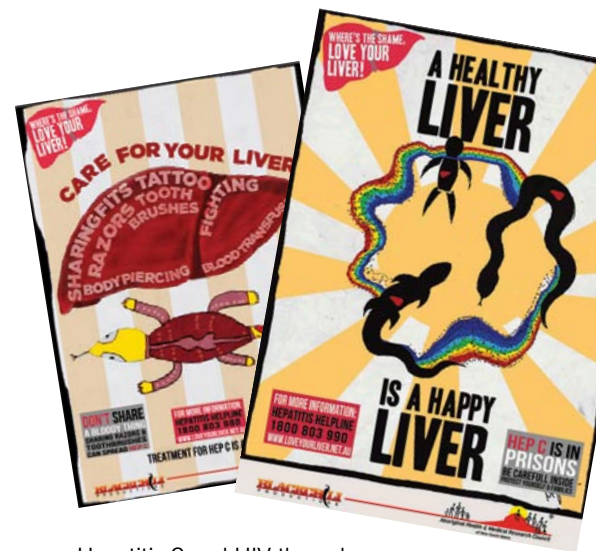
- The *Where's the Shame, Love Your Liver* campaign was rolled out to 10 communities across NSW, in partnership with the Deadly Award-winning band The Last Kinection. The promotional campaign was part of a state-wide effort to raise Aboriginal peoples' awareness of the hepatitis C virus and its impact on Aboriginal communities through the use of creative arts. Attendees of the workshops were given the opportunity to take part in several activities to raise awareness about hepatitis C in a way that was relevant to them and their communities. Activities included writing and recording a song with The Last Kinection, as well as producing video clips, creating animations and designing hepatitis C-related health promotion posters, which were displayed at other workshops throughout NSW. Over the course of the campaign more than 13 posters, 36 songs and 31 film clips were developed by participants and distributed across NSW. Key partners included the Aboriginal Hepatitis C Access Coordinators, the Aboriginal STI, HIV and Hepatitis Workers Network, Local Health District workers and Hepatitis NSW.
- The *Where's the Shame, Love Your Liver* campaign won an award for Excellence in Viral Hepatitis Health

Promotion at the National Viral Hepatitis Health Promotion Conference held in November 2011.

- The AH&MRC launched the *Your Mob, My Mob, Our Mob* Hepatitis C Peer Education project, which involved training young Aboriginal people to discuss Hepatitis C prevention and management with their peers. The project is being rolled out to NSW ACCHSs and is also being hosted in juvenile detention settings throughout the State. The AH&MRC is also working in close partnership with Hepatitis NSW to deliver this training.
- The AH&MRC continued to focus on preventing the transmission of blood borne viruses such as

Hepatitis C and HIV through encouraging the adoption of harm minimisation strategies. At the Annual General Meeting in October 2011, it was agreed that the AH&MRC should take the lead in advocating for Aboriginal people who inject drugs.

- Key achievements in the area of harm minimisation during the reporting period included the printing and distribution of the report *Needle and Syringe Program: Mapping Service Provision in Aboriginal Community Controlled Health Services* and the paper *Injecting Drug Use Among Aboriginal People in NSW (the Pharmacy Project)*.



Some of the many resource materials produced by the AH&MRC Public Health Team



# Tobacco Resistance and Control

**Our role:** The AH&MRC Tobacco Resistance and Control (A-TRAC) Program has a broad goal of reducing tobacco use among Aboriginal people by integrating tobacco control and smoking cessation activities into the ACCHS model of comprehensive primary health care. This year's achievements include:

- A regional forum was delivered in Port Macquarie to ACCHS staff and managers working in the area of tobacco control. The forum focused on developing workforce skills, increasing ACCHS staff knowledge about the use of Quitline and social marketing. Additional forums will be delivered later in 2012.
- The initial planning for the *A-TRAC Symposium 2012: Smoke Free Future* was undertaken during 2011-12. This symposium aims to bring together ACCHS staff working and interested in discussing a broad range of initiatives to encourage the integration of tobacco control activities into the ACCHS comprehensive model of care, and will be held in August 2012.
- The A-TRAC email network continues to provide a mechanism for the distribution of updated information on tobacco resistance and control to ACCHS staff and successful quitting stories from ACCHS programs.
- Localised social marketing campaigns have been developed and implemented in three NSW communities through the *Kick the Habit* project. This capacity-building project worked with each community to develop a film and accompanying resources, all targeting local tobacco control issues and featuring community members. Each community worked closely with the A-TRAC team to host a launch in their area. The resources produced through the three local campaigns were also adapted for state-wide distribution.
- Funding from the NSW Ministry of Health allowed the purchase of 48 piCO Smokerlyzers, which were distributed to ACCHS across NSW. The A-TRAC program provided support and training of staff in the use of the Smokerlyzers and adapted resources to accompany the devices.
- The AH&MRC is represented on a range of tobacco control related committees and advisory groups, both nationally and NSW, including: the Department of Health and Ageing's Tobacco Technical Reference Group, NACCHO's Tackling Smoking Advisory Committee and the Cancer Council's Smokefree Prisons Working Group. The AH&MRC is also working in partnership with the NSW Ministry of Health to establish an Aboriginal Partnership Sub-Committee on Tobacco Resistance and Control to guide tobacco control programs and activities at the state level.

## The Quitline Enhancement Project

*The Quitline Enhancement Project* is a project being undertaken by the AH&MRC working in collaboration with the Cancer Institute of NSW, NSW Quitline and other partners, and involves the planning development, implementation and evaluation of a culturally appropriate and accessible Quitline service in NSW and the ACT for Aboriginal people who smoke. The AH&MRC has provided support and advice during various stages of the formative research. The final research report and community reports have been finalised and disseminated to ACCHS during 2011-12. The project facilitated a number of site visits during the year, where updates about the Quitline telephone service were provided and ACCHS staff were given the opportunity to ask questions about the service. Aboriginal specific postcards promoting the Quitline service across NSW have also been developed and disseminated as part of this project.

The *Kick the Habit* project worked with communities to develop anti-tobacco resources featuring respected members of the local community





# Chronic Disease

**Our role:** The Chronic Disease Program aims to build capacity of NSW ACCHSs in the prevention and management of chronic disease, and to build and maintain relationships with stakeholders involved in chronic disease. This program is funded by the NSW Ministry of Health.

This year's achievements include:

- The AH&MRC Chronic Disease Program delivered four regional workshops in Coffs Harbour, Moree, Griffith and Nowra for ACCHS staff and other key stakeholders on the topic of cardiovascular disease. Sixty five participants attended the various workshops, which featured several external organisations and individuals engaged to deliver specific sessions.
- Four "Introduction to Spirometry" training workshops presented by trainers from the Asthma Foundation NSW were delivered in Sydney, Dubbo, Moama and Ballina, with 28 people completing the training. After the training a series of site visits, facilitated by a trainer from the Asthma Foundation NSW, were hosted at participating ACCHSs.
- The *Site Exchange Program* continues to facilitate site exchanges between staff from AH&MRC member ACCHSs, providing participants with opportunities for networking and information sharing. In 2011-12, many of these site exchanges focused on adult and child health checks and clinical support, but the program also extended to include supporting participants to implement programs, start up new services and achieve accreditation.
- The *Living Longer Stronger: The AH&MRC Chronic Disease Conference 2012* was held at the Mercure Hotel in Sydney on 19-20 June. The conference focused on building skills and knowledge for Aboriginal communities to address chronic disease, particularly through ACCHS. More than 120 participants attended over the two days, including Aboriginal Health Workers and clinical staff from ACCHSs, as well as staff from organisations that currently work collaboratively with their local ACCHSs. A range of expert presentations, educational workshops and interactive planning sessions were delivered, offering attendees the opportunity to exchange ideas and establish productive professional relationships.
- The AH&MRC provides representatives for several NSW Ministry of Health committees and groups relating to chronic disease, including: the Chronic Disease Management

Program Care Steering Committee and the Care Navigation Support Program Steering Committee. The AH&MRC has also worked in partnership with the NSW Ministry of Health to establish an Aboriginal Partnership Sub-Committee on Chronic Disease Prevention and Management to guide chronic disease programs and activities at the state level.

- In 2011-2012 the AH&MRC was funded by the NSW Ministry of Health to undertake the *ACCHS Chronic Disease Workforce Needs Project*, which aims to identify the chronic disease workforce needs of member ACCHSs. This project uses in-depth interviews with a selection of ACCHSs and "snapshot" surveys with all member ACCHSs to describe the current workforce involved in delivering chronic disease care and programs within an ACCHS setting, as well as to identify future workforce needs. The report of this project will be available in late 2012.



The AH&MRC's Kerri Lucas, Katarina Curkovic and Jo Coutts with Uncle Max Eulo at the *Living Longer Stronger: AH&MRC Chronic Disease Conference 2012*

# Cancer

The Aboriginal Cancer Partnership Project represents a collaboration between the AH&MRC, the Cancer Institute of NSW and the Cancer Council of NSW, and is funded by the NSW Ministry of Health. This project has recently commenced, and will feature a range of initiatives designed to support Aboriginal communities to improve cancer care for Aboriginal people in NSW.

## Mental Health

**Our role:** The AH&MRC's mental health program developed as a result of recognising that ACCHSs were underrepresented within the area of mental health, both at a workforce level and at a state-wide policy development level. The program aims to support ACCHSs to deliver effective mental health programs, as well as inform the NSW Ministry of Health on key mental health issues that affect Aboriginal communities. This year's achievements include:

- In March of 2012, the AH&MRC facilitated a two-day workshop for Aboriginal Mental Health Workers from ACCHSs and Local Health Districts on the topic of "Collaborative Partnerships". More than 80 people attended, including frontline workers, clinical work-

ers and managers of Aboriginal mental health, and social and emotional wellbeing programs and services. The workshop showcased programs that involved joint work and identified ways to move forward for the benefit of clients and community. Participants developed themes and activities for Mental Health Awareness week, which is due to be held in October 2012.

- During May to July 2012, the AH&MRC delivered eight Aboriginal Mental Health First Aid (AMHFA) workshops to member services. The aim of the training was to build the capacity of ACCHS staff and the Aboriginal community to respond to mental health issues. These

workshops were delivered in Wagga Wagga, Orange, Tamworth, Balranald, Sydney, Coffs Harbour, the Northern Rivers and Walgett. In total, 130 ACCHS staff and community members participated in the training, including 11 staff from the AH&MRC.

- The AH&MRC chaired the Aboriginal Organisation Subcommittee for the World Congress of Psychotherapy 2011, held in Sydney in August 2011. In addition, the AH&MRC continued to play a key role in advocating for ACCHSs on a number of Ministry of Health committees on mental health, in particular those strategies developed as a result of the *National Partnership Agreements on Indigenous Health*.



## Continuous Quality Improvement

**Our role:** The AH&MRC Continuous Quality Improvement (CQI) program is responsible for developing a range of activities, networks, tools and resources to support and build capacity of member ACCHSs in CQI, and is funded by the NSW Ministry of Health.

This year's achievements include the establishment of the AH&MRC CQI Program, which has specific aims to:

- Build ACCHSs infrastructure, skills, good practice and effective systems for data collection, management and use;
- Support ACCHSs to build sustainable and effective

continuous quality improvement systems with a focus on chronic disease prevention/management;

- Document, promote and share models of good practice in data management and clinical quality improvement in an Aboriginal primary health care context.

The initial areas of focus for the AH&MRC CQI Program in 2011-12 were to undertake detailed assessments of the infrastructure and needs of member ACCHSs via site visits and to deliver workshops to support members' use of the Clinical Audit Tool for quality improvement purposes.



## Education & Training Placements

The AH&MRC offers training placements to trainees in the NSW Public Health Officer and Australasian Faculty of Public Health Medicine training programs.

Throughout 2011-2012, a Public Health Medical Registrar was placed at the AH&MRC to undertake projects relating to oral health and data governance, as well as to support the work of the other members of the AH&MRC Public Health Team.

A report from an earlier NSW Public Health Officer trainee project about the importance of strengthening public health partnerships between government and Aboriginal Community Controlled Health sector organisations was also completed during this period.

## Public Health Medical Officer

**About the role:** The AH&MRC Public Health Medical Officer (PHMO) provides technical advice and support to member ACCHSs, AH&MRC staff and partner organisations about a broad range of public health, medical and research issues. This year's achievements include:

In addition to managing the AH&MRC Continuous Quality Improvement and Research Capacity Building Programs, the PHMO has:

- Represented AH&MRC on several committees and advisory groups;
- Continued to serve on the Board of Directors of the Rural Doctors Network of NSW;
- Represented NACCHO on the National Maternal Mortality Advisory Committee and the Aboriginal and Torres Strait

Islander Demographic Statistics Expert Advisory Group;

- Continued to co-chair the Aboriginal and Torres Strait Islander Working Group and participated on the Executive Advisory Group to develop national evidence-based antenatal care guidelines. The first module of guidelines has been endorsed by the National Health and Medical Research Council, and is scheduled for release in 2012;
- Participated in the national network and meetings of Affiliate and NACCHO Public Health Medical Officers, including contributing to the development of national Key Performance Indicators and a funding submission for a national CQI Program.

## AH&MRC GP Forum and Clinical Update

The fifth annual *AH&MRC GP Forum and Clinical Update* was held in August 2011, supported by the NSW Rural Doctors Network. This event was attended by 26 GPs and GP Registrars from 14 different ACCHSs. As with previous years, the program included a mix of clinical updates and workshop sessions, as well as opportunities for ACCHS GPs to network to share information, experiences and ideas. Topics this year included sexual health, chronic kidney disease, alcohol addiction, telehealth, ACCHS clinical systems, and the challenges and rewards of ACCHS GP work.

Both formal and informal evaluations were positive, with many GPs commenting that all sessions were useful and that the forum provided an excellent opportunity to network and share experiences with other ACCHS GPs and registrars. 🖐️

Some of the many resource materials produced by the AH&MRC Public Health Team





# Research Support and Capacity Building

## What We Achieved in 2011-12

We continued to be involved in a multitude of research projects, either by leading the research ourselves, participating in various research teams and advisory groups, or advising research projects that were led by external organisations.

THE AH&MRC PROVIDES SUPPORT AND ADVICE to member ACCHSs about research, as well as to researchers who are interested and active in Aboriginal health research in NSW and nationally.

In 2011-2012, the AH&MRC continued efforts to provide support for high quality Aboriginal health research in NSW through the Research Support and Capacity Building Program. A National Health and Medical Research Council (NHMRC) Capacity Building Grant has supported this work since 2010, enabling the establishment of a register and the development of protocols and processes to monitor, support and report on the involvement of the AH&MRC in research. Since the expiration of this grant in April 2012, this key function has been continued as a core AH&MRC program.

## Key Activities and Accomplishments

- In late 2011, the AH&MRC initiated a project to develop a tool to assist ACCHSs with decision making about their involvement in research. This project was developed in response to member ACCHSs' requests for support in this area. Interviews were conducted with member ACCHSs about their views and experiences of research and will be used to develop a relevant and useful tool. The project is expected to be completed in late 2012.
- One of the main activities for the Research Support and Capacity Building Program this year has been responding to requests for advice and support from researchers, particularly for state-wide projects using data linkage methodologies, the NSW components of national projects or projects involving multiple ACCHS sites. In this financial year the AH&MRC received 26 new requests for research advice and involvement. In the previous financial year 22 requests were received.
- As at 30 June 2012, the AH&MRC is actively involved in supporting 44 research projects with a further 16 proposed projects under consideration. The support provided can include participation on the investigator team or through AH&MRC representation on a range of advisory and reference groups that have been established for each project, as well as through the provision of informal advice and support in the development phase and subsequently.
- Some of the research projects and programs of research where AH&MRC has been actively providing support in 2011-2012 include:
  - Aboriginal Communities' Water and Sewerage Program Health Outcomes Evaluation
  - Aboriginal Patterns of Cancer Care (APOCC)
  - Australian Collaboration for Chlamydia Enhanced Sentinel Surveillance Program (ACCESS)
  - Development of Aboriginal Health Workers Oral Health training
  - Enhanced Reporting of Aboriginality in Administrative Datasets
  - Health Tracker (TORPEDO)
  - Increasing Completeness of Aboriginal Status in the New South Wales Notifiable Conditions Information Management System by Data Linkage
  - Indigenous Health Outcomes Patient Evaluation (IHOPE)
  - Kanyini Vascular Collaboration
  - Models of Vision Care Delivery for Aboriginal and Torres Strait Islander Communities (Vision CRC)
  - Mothers Who Die: National Population Study of Mothers Dying Late in Pregnancy and in the First Year After Birth
  - Notifiable Diseases and Obstetric Outcomes; Sub-Study Aboriginal Women
  - Study of Environment and Aboriginal Resilience on Child Health (SEARCH)
  - Research Excellence in Aboriginal Community Controlled Health (REACCH)
  - Road Safety and Aboriginal People
  - Social and Cultural Resilience of Aboriginal Mothers in Prison (SCREAM)
  - Talking About the Smokes (TATS)
  - Young Aboriginal and Torres Strait Islander National Health Survey (GOANNA)
  - What Factors Drive the Gap in Indigenous and Non-Indigenous Diabetes Rates and Related Health Outcomes in NSW?

This financial year the AH&MRC received 26 new requests for research advice and involvement, compared to 22 the previous year

### BREATHE Project

Building Research Evidence to Address Aboriginal Tobacco Habits Effectively (BREATHE) is a large-scale research project trialing the impacts of funding and supporting a specialist tobacco control worker in an ACCHS setting. BREATHE has been led by the AH&MRC since 2008, with funding and support from the Australian Respiratory Council, the Cancer Council of NSW and the Heart Foundation.

During 2011-2012, progress with data analysis was made, and some preliminary feedback was provided to the 12 participating ACCHSs. A presentation about the BREATHE project was delivered at the *Oceania Tobacco Control Conference* in late 2011. Technical and community reports about the project findings are currently being prepared. 🖱️

# The AH&MRC Ethics Committee

THE AH&MRC ETHICS COMMITTEE REVIEWS RESEARCH proposals affecting the health of Aboriginal people across a broad range of fields, gives ethical approval for the conduct of such research in NSW and provides advice to researchers on the ethical conduct of health research affecting Aboriginal people. The Committee has operated since 1996. It is an official Human Research Ethics Committee (HREC) under the Commonwealth National Health and Medical Research Council (NHMRC) legislation.

The Committee currently has 12 members, of whom ten are Aboriginal. Nine of the members live outside Sydney. A majority of the positions on the

Committee (seven members) are designated for representatives of Aboriginal Community Controlled Health Services (ACCHSs), including three members of the AH&MRC Board of Directors. The other positions on the Committee are designated to be held by at least one person from each of the following groups: Aboriginal elder, lay person, medical researcher, medical practitioner, clinician and lawyer.

The Committee is supported in its work by an External Reference Panel made up of specialist experts from a diverse range of health and medical fields, as well as a Secretariat consisting of two part-time staff.

## What We Achieved in 2011-12

We continued to assess research proposals affecting the health and wellbeing of Aboriginal people and communities in NSW, and to monitor the collection of data on Aboriginal health to ensure these activities were conducted in an ethical manner.

The Ethics Committee continued to operate very effectively and efficiently during 2011-12 and maintained its commitment to make ongoing improvements. Current priorities include continuing to promote the role of the Committee, reviewing activities and processes to meet the growing demand for ethical review of Aboriginal health-related research and participating in national initiatives to enhance ethical review of research.

The Committee also acknowledges the contribution of outgoing Executive Officer, Mr Bob Davidson, who during his five years with the Ethics Secretariat guided the implementation of the recommendations outlined in the 2006 *Reid Review of the Ethics Committee*.

### Key Activities and Accomplishments

- As advised by the NHMRC in December 2011, the Committee continued to meet the requirements of the *National Statement on Ethical Conduct in Human Research, 2007*.
  - Meetings of the Ethics Committee are held bi-monthly and six meetings were held during 2011-12. Committee members also undertook substantial work out-of-session in the consideration and approval of applications.
  - During 2011-12, the Ethics Committee participated in a number of national forums.
- It continued its involvement in the development of the NHMRC's HoMER (Harmonisation of Multi-Centre Ethical Reviews) project through the Deputy Chair and Executive Officer's membership in the HOMER Indigenous Sub-group. The Sub-group is working towards better coordination of ethics approvals processes for Aboriginal health research projects that are conducted in a number of states. The Ethics Committee was also represented at the Lowitja Institute's second *Roundtable on Indigenous Genetics Research* in Melbourne in July 2011 to consider the implications of genetic research for Indigenous people.
- A partnership agreement was developed with the University of Western Sydney for medical students to undertake research at the AH&MRC as part of the University's Year 4 Community Medicine Group Project, *Aboriginal Health, Access and Equity in NSW*. The program aims to foster an

ongoing interest in, and commitment to, the health of Aboriginal people that medical students will carry through their careers. The first group of students visited the AH&MRC in June 2012 to assist the Ethics Unit to develop a methodology for analysing research into Aboriginal health in NSW.

- The Ethics Committee Secretariat continued to work with the AH&MRC Research Unit to ensure Aboriginal community control of research projects affecting Aboriginal people. This includes establishing processes so that researchers are aware of the distinct roles of the Ethics Committee and the AH&MRC Research Unit, and working together to develop research workshops for ACCHSs, communities and researchers.
- The Ethics Committee considered 79 applications seeking approval

for new research in a very diverse range of fields, a 40% increase on applications received in the previous financial year. In addition, it considered many requests for approval to amend or extend projects previously approved, as well for the review of reports, conference papers, presentations and journal articles arising from this research.

Applications covered many different fields, including:

- acute coronary syndrome treatment
- ageing offenders
- cardiovascular risk
- child welfare
- chiropractics
- chronic disease screening
- community & family resilience
- diabetes
- drug & alcohol conditions & services
- education & training
- exercise & sport
- eye health

- GP & other health services delivery
- health promotion
- hepatitis
- housing
- immunisation
- maternal health
- mental health
- obesity
- obstetrics
- oral health pharmaceuticals
- prisoner health
- psychosis & offending
- road safety
- sexually transmitted conditions & treatments
- smoking cessation programs
- women's health

- The Ethics Committee developed and is implementing an operations manual that consolidates the various policies and procedures concerning the consideration and approval of applications that have been developed by the Committee. 🖐️



The Ethics Committee considered 79 applications seeking approval for new research in a very diverse range of fields — a 40% increase on the previous financial year

Fourth-Year Medical Students from the University of Western Sydney undertake a research project in the AH&MRC's Ethics Unit



# About the Art in this Annual Report

To illustrate this year's *Annual Report*, the AH&MRC asked employees to create works of art that reflect our community focus — and we couldn't be happier with the results!

THE PAINTING ON THE COVER OF THIS YEAR'S *Annual Report* and all the other works of art you see on these pages were created by members of the AH&MRC's staff — both Aboriginal and non-Aboriginal — who came together to take part in a cultural awareness-raising art workshop held in April 2012.

The aim of the art workshop, which was hosted by Koomurri Management, was to promote awareness of Aboriginal culture in a fun environment. The participants from the AH&MRC were not professional artists but were instead employees drawn from every part of our organisation, ranging from project officers in our public health programs to researchers and medical specialists — and even a member of our finance team.

"I think it was good because it wasn't just Aboriginal people who work at the AH&MRC coming together, it was all staff, which reflects the organisation itself," said Kristie Harrison, an AH&MRC Project Officer with the Aboriginal Drug and Alcohol Network.

"Different people brought different ideas and meanings," Harrison said.

"The workshop reiterated the fact that Aboriginal art is not just about pretty pictures — it is about stories, it is about histories, it is about meanings," she said. "Every painting we did told a different story, and you can see that quite clearly in the works we produced."

For most of the participants it was their first exposure to the process of creating Aboriginal art. Others, predominantly staff members from Aboriginal backgrounds, were more familiar with Aboriginal art and helped to guide and inform less experienced staff. But they all joined together to collaborate on the vibrant images you see displayed throughout this year's *Annual Report*.

"I've never done anything like this before, but I did enjoy it," said Angela Nicholas, the AH&MRC's Assistant Accountant. "The best part was getting my hands dirty and learning what all the different symbols mean."

"It was great," agreed Lisa Camillo, the AH&MRC's Hepatitis C Project Officer. "I learnt how to interpret Aboriginal art and what the symbols mean, and how every painting has its own story. Now I understand more about the stories behind other Aboriginal paintings that I see."





Photography: Stillianos Doussis

### A whole-of-life view of health

The staff members who took part learnt many significant lessons related to Aboriginal art, including the importance of imagery associated with mountains, rivers, animals and other natural phenomena. Stories, symbols and styles from different Aboriginal nations were explored in a classroom environment to prepare staff for their participation in painting sessions on large canvases. During the sessions, a mix of traditional and contemporary colours were used to create striking images that tell the story of the important role health plays in the overall strength of the community.

“We wanted to do paintings that were about living a healthy lifestyle, and I think the work we did really captures the whole-of-life Aboriginal approach to health, where life is health,” said Sara Knuckey, Senior Project Officer for Research and Evaluation with the AH&MRC’s Aboriginal Tobacco Resistance and Control Team.

“I enjoyed learning the things we did, and picking up new skills and discovering the meanings behind the symbols in the paintings,” said Mathew Fields, a Project Officer with the AH&MRC’s Sexual Health Team.

“We were asked to represent things that we thought were important in the paintings, and I wanted to represent our values and show respect for our culture. But I think we all learnt something from the process of collaborating on the paintings,” he said.

“This was a fantastic team-building exercise,” said Kylie

Haywood, the Senior Project Officer with the AH&MRC’s Research and Evaluation Capacity Building Program.

“Not only was it a great bonding session, but I think it was really good as an exercise in cultural awareness, particularly for our non-Aboriginal staff, because it allowed us to go into the symbols and actually think about them and reflect on community values from different perspectives,” she said. 🖐️

### Congratulations to the AH&MRC’s resident artists!

The art featured in this annual report was created by:

**Lisa Camillo** - Project Officer, Hepatitis C

**Megan Campbell** - Public Health Medical Registrar

**Jo Coutts** - Chronic Disease Coordinator

**Katarina Curkovic** - Project Officer, Chronic Disease

**Elizabeth Dwyer** - Project Officer, Tobacco Resistance & Control

**Mathew Fields** - Project Officer, Sexual Health

**Kaylie Harrison** - Project Officer, Aboriginal Employment Program

**Kristie Harrison** -

Project Officer, Aboriginal Drug & Alcohol Network

**Kylie Haywood** - Senior

Project Officer, Research & Evaluation Capacity Building

**Sara Knuckey** -

Senior Project Officer, Tobacco Resistance & Control

**Kerri Lucas** - Public

Health Manager

**Angela Nicholas** -

Assistant Accountant

**Jasmine Sarin** -

Senior Project Officer, Tobacco Resistance & Control

**Dina Saulo** - Project Officer,

Sexual & Reproductive Health

# Make a Donation to the AH&MRC

Help us create a better health future for Aboriginal people in NSW

The Aboriginal Health and Medical Research Council of New South Wales (AH&MRC) is the peak body for Aboriginal Health in NSW and is comprised of Aboriginal Community Controlled Health Organisations from across the State, all of which provide vital health and related services to the Aboriginal communities they serve.

All donations to the AH&MRC are used to fund initiatives which aim to improve the health of Aboriginal people in NSW. You can choose from three donation types:

## General donations

Every contribution, large or small, makes a difference to the health outcomes of Aboriginal people in NSW. Your donation will be added to a general fund which is dedicated to improving the health and wellbeing of Aboriginal communities throughout the State.

## Bequests

You can leave a lasting legacy by including a bequest to the AH&MRC in your will.

## Endowments & scholarships

Invest in a better health future for Aboriginal people today by making a substantive contribution to the education and training of new workers in the Aboriginal health sector. A range of education and training endowments and scholarships are available to support the important work of the Aboriginal Health College and other AH&MRC-affiliated training providers.



## How to donate:

### Internet

To donate online, please visit the "Donate" page on the AH&MRC website at: <http://www.ahmrc.org.au>

### Mail

Cheques or money orders, made payable to **The Aboriginal Health and Medical Research Council of NSW** may be sent to:

**AH&MRC of NSW**  
**PO Box 1565**  
**Strawberry Hills NSW 2012**  
**Australia**

### Telephone

To donate via telephone, call **(02) 9212 4777**. Please have your credit card details on hand when you call.

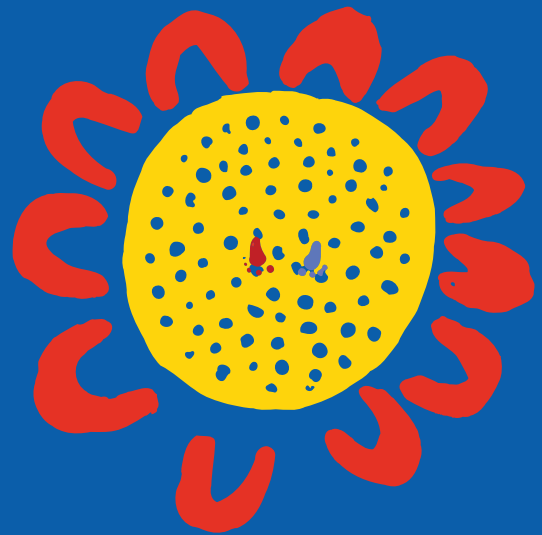
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- The AH&MRC has a current "Endorsement as a deductible gift recipient" issued by the Australian Taxation Office.
- This may be 'cross-checked' on the ABN Lookup web site at <http://www.abr.business.gov.au>

- There are absolutely no management fees or charges under any spurious names.
- Bank and Audit fees are covered by the AH&MRC Secretariat
- Donations over two dollars (\$2.00) are Tax Deductible.

### Contact Us

If you have any questions about making a donation, please do not hesitate to contact the AH&MRC on **(02) 9212 4777**



Improving the health  
of Aboriginal people  
and their communities

Working  
for a better  
health future  
for Aboriginal  
people in NSW

