



**Australian Government**

**Department of Health**

# Aboriginal and Torres Strait Islander Health Partnership Forums

Commonwealth Department of Health Update

The Aboriginal and Torres Strait Islander Health Partnership Forums (the Partnership Forums) provide a formal mechanism for engagement, collaboration, planning and data information sharing between members to achieve improved health outcomes for Aboriginal and Torres Strait Islander people.

Membership of the Partnership Forums comprises the signatories to each jurisdictional Partnership Framework Agreement: the Australian Government (represented by the Department of Health) the State / Territory Government (represented by the Department of Health) and the jurisdictional Aboriginal health peak body. Arrangements relating to the participation of other guests vary between the Forums, and may include the Primary Health Networks and representatives of the National Indigenous Australians Agency.

The eight Partnership Forums aim to meet 3-4 times per calendar year. The *Commonwealth Department of Health Update* provides Partners with the latest information about the Department's business relating to Indigenous health policies and programs. This includes updates on projects that impact the sector or stakeholders; tenders, evaluations and opportunities for consultation; and significant policy developments.

Please feel free to share this update with your networks.

For further information, please contact the Commonwealth Department of Health Partnership Forums Team: [Commonwealth.Partnership.Forums@health.gov.au](mailto:Commonwealth.Partnership.Forums@health.gov.au).

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## New Updates

### 1. Closing the Gap - Coalition of Peaks' online survey to inform development of the new National Agreement

[The Coalition of Aboriginal and Torres Strait Islander Peak Organisations \(Coalition of Peaks\)](#) is working with Australian governments to develop a new National Agreement on Closing the Gap (National Agreement) that will set out what will be done over the next ten years to improve the lives Aboriginal and Torres Strait Islander people.

As part of consultations, face to face meetings are being held, as well as discussions on the phone and on online survey. A report on what is said will be prepared by the Coalition of Peaks, to be provided to governments and made public. A link to the Coalition of Peaks' survey and further information is [here](#). The online survey closes on 25 October 2019 at 5.00pm.

### 2. Request for Tender - Australian Nurse-Family Partnership Program National Support Service

The Australian Nurse-Family Partnership Program (ANFPP) is a licenced adaptation of the evidence-based Nurse Family Partnership home visiting program and provides comprehensive, structured home visiting services to women pregnant with an Aboriginal and/or Torres Strait Islander baby during pregnancy and continuing until their child is two years old. The [ANFPP](#) has been implemented since 2009 and currently operates in 13 sites across Australia.

A Request for Tender (RFT) for a supplier to provide the ANFPP National Support Service was posted to [AusTender](#) on 23 September 2019 and will remain open until 4 November 2019.

The ANFPP National Support Service provides home visiting staff with comprehensive and culturally appropriate training. The ANFPP National Support Service's responsibilities include:

- Monitoring and adherence to the contractual requirements under the ANFPP Licence Agreement between the Department of Health and the licence holder, the University of Colorado.
- Workforce development and education, including supporting recruitment activities to attract staff, supporting program experiences that improve staff retention and delivering an effective training program.
- Monitoring and evaluation, including analysis of data and development of quarterly fidelity reports, quality reviews, annual data reporting and assistance with maintaining the infrastructure required to monitor the program.
- Provision of materials to support the program, including adaptation of existing NFP materials to the Australian context, and development of new materials that will support the implementation of the program.

See the [AusTender](#) listing for more details, or contact [ANFPP@health.gov.au](mailto:ANFPP@health.gov.au).

### 3. Primary Health Care 10 Year Plan

Earlier this year the Hon Greg Hunt MP, Minister for Health, announced his intention to develop a 10 Year Plan to drive reform of the primary health care system in Australia over the next decade. The 10 Year Plan will look at the system as a whole and identify innovative solutions to reorient

the health system towards integrated patient-centred health care that focuses on health outcomes. The Plan will build on and complement the *National Aboriginal and Torres Strait Islander Health Plan 2013-2023*.

To advise on development of the 10 Year Plan, the Department is establishing the Primary Health Reform Steering Group. The Steering Group will include members from across the primary health care system and will include a representative from the Indigenous health sector. The Department will consult extensively with consumers, the primary health care sector, the Aboriginal Community Controlled Health sector and other stakeholders through a range of mechanisms.

The Plan is expected to be delivered in mid-2020.

#### 4. iSISTAQUIT training program

The Department of Health is funding the University of Newcastle to deliver the iSISTAQUIT program (online training to health professionals) under the Tackling Indigenous Smoking program.

The iSISTAQUIT initiative is a multi-component approach aimed at improving health practitioners' provision of smoking cessation care to pregnant Aboriginal and Torres Strait Islander women. The training is a whole-of-service approach – any health practitioner who sees a pregnant woman in any capacity will be able to complete the training. Training is provided to health practitioners via webinars and a treatment manual. Resources to aid smoking cessation care include a flipchart and a patient booklet. Other resources supplied are a carbon monoxide meter and oral nicotine replacement therapy (NRT). The training will be internet-enabled and self-paced and include on-line support via a community of practice. All-of-service training is optimal for organisational change and sustainability, so training includes all staff. The training and resources are free of charge.

In addition to Aboriginal Community Controlled Health Services (ACCHS), mainstream services may also participate in the program, in recognition that many Indigenous people attend such services.

Nominations of health services that may be well-placed to participate in iSISTAQUIT can be sent to [isistaquit@newcastle.edu.au](mailto:isistaquit@newcastle.edu.au).

## Routine Updates

#### 5. National Aboriginal and Torres Strait Islander Health and Medical Workforce Plan

In August 2018, the Council of Australian Governments Health Council (CHC) committed to work with Aboriginal and Torres Strait Islander leaders to develop a National Aboriginal and Torres Strait Islander Health and Medical Workforce Plan (Workforce Plan).

The Workforce Plan will focus on attracting, training and retaining the Aboriginal and Torres Strait Islander health workforce across Australia. It will also be used to supplement the National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework 2016-2023, with a focus on implementation.

The Workforce Plan will be informed by extensive consultations across Australia. This includes the community controlled and mainstream health sector, education and research institutes, health

workforce peak organisations, mental health organisations, Commonwealth agencies, state and territory governments and state and territory health and hospital services. Engagement will also take place through State and Territory Aboriginal Health Partnership Forums.

In addition, a [website](#) has been developed to allow written feedback from a broad range of stakeholders.

A Project Scoping Paper that outlines the vision for the Workforce Plan, will be provided to the COAG Health Council for consideration at its meeting on 1 November 2019.

A National Workshop for key leaders and organisations in the sector to review the draft Workforce Plan will be held in early 2020. It is anticipated that the final Workforce Plan will be delivered to CHC for endorsement in mid-2020.

## 6. Primary Health Care Reforms

The Department is continuing to progress a number of Primary Health Care (PHC) reforms aimed at improving access to, and delivery of, PHC services to Aboriginal and Torres Strait Islander people.

### Increasing Uptake of 715 Health Assessments

Work continues on increasing the rates of MBS 715 health assessments. The Department is working with 33 Creative, an Aboriginal owned and managed communications, media and events company, to develop and distribute communication products targeted at health practitioners and patients. The materials developed include a patient journey to assist health practitioners to map the “whole of practice” approach to undertaking 715 health checks. In addition, a suite of communication materials has been developed with a range of distribution approaches used, including through social media channels; and a podcast and animation which are available on the Aboriginal Health Television Network, in Aboriginal Community Controlled Health Services and in some General Practices. Posters and brochures have been mailed to services and stakeholders, and are also available on the Department of Health’s [website](#), or by emailing [info@33creative.com.au](mailto:info@33creative.com.au).

### Indigenous Pharmacy Programs Reform

Another key area for PHC reform is improving access to, and the effective use of, Pharmaceutical Benefits Scheme medicines for Aboriginal and Torres Strait Islander people under the four Indigenous Pharmacy Programs. Reform work is ongoing to improve the effectiveness of these programs, with policy options developed to consolidate the four programs to two new programs:

- Closing the Gap and Remote Australia Medicines Access Program
- Closing the Gap and Remote Australia Medicines Enablement Program

Two rounds of consultation were undertaken with key stakeholders, including the National Aboriginal Community Controlled Health Organisation (NACCHO) and its affiliates and state and territory health departments, from September to November 2018, to inform further development of the policy options. This stakeholder engagement process identified a preference for expanding eligibility for the PBS Closing the Gap measure for both patients-and prescribers, while also looking to expand the range of medicines available through this measure. There was also support for

enabling any Aboriginal Community Controlled Health Service or other Indigenous-specific health services to apply for Quality Use of Medicine funding and for the service to receive this funding directly.

Approval of these policy options and any subsequent implementation actions remain matters for Government decision.

### Practice Incentive Program Indigenous Health Incentive

The Practice Incentive Program Indigenous Health Incentive (PIP IHI) review aims to better incentivise the provision of care and make the program more accessible to every Aboriginal and Torres Strait Islander person living with a chronic disease.

In August 2019, the Department finalised the public consultation process on the review of the PIP IHI. Over 26 written submissions were received, including from the Australian Medical Association (AMA), the Royal Australian College of General Practitioners (RACGP), the National Aboriginal Community Controlled Health Organisation (NACCHO) and service providers. The Department also engaged consultants ThinkPlace to conduct face to face consultations with stakeholders. This included workshops, smaller focus groups, one-on-one and small group interviews and a webinar. These were held in Brisbane, Dalby, Canberra and Adelaide and an online forum also offered, with 68 participants engaging in these consultations.

The Department is now using the recommendations from this consultation and submission process to provide advice to Government on potential improvements to the PIP IHI.

### 7. Practice Incentives Program (PIP) Quality Improvement (QI) Incentive

The PIP QI Incentive commenced on 1 August 2019. PIP QI is available to all PIP-registered general practices, including Aboriginal Community Controlled Health Services (ACCHS) and other organisations funded under the IAHP for the delivery of primary health care services.

The PIP QI Incentive is a payment to general practices for activities that support continuous quality improvement in patient outcomes and the delivery of best practice care.

Central to the PIP QI Incentive is the provision of data against ten *Improvement Measures* representing key health priority areas. These Improvement Measures have been drawn from the Aboriginal and Torres Strait Islander National Key Performance Indicators (nKPIs) and adapted for the non-Indigenous Australian population.

ACCHS and other organisations funded under the IAHP already have a well-established system of using primary health data to undertake quality improvement activities. This includes reporting against nKPIs. This information assists ACCHS and other organisations funded under the IAHP to improve and maintain high quality clinical practice and service delivery of primary health care and health outcomes for Aboriginal and Torres Strait Islander people.

The PIP QI Incentive will support ACCHS and other organisations funded under the IAHP in continuing their current work in quality improvement within Aboriginal and Torres Strait Islander communities. ACCHS and other organisations funded under the IAHP will be eligible to apply for the PIP QI Incentive and it is expected they will meet the requirements for payment within existing arrangements with the Department of Health.

The PIP QI Incentive Guidelines and more information on PIP QI is available on the Department of Human Services [website](#).

## 8. Evaluation of the Australian Government's Investment in Aboriginal and Torres Strait Islander Primary Health Care (PHC) under the Indigenous Australians' Health Programme (IAHP) (Aboriginal and Torres Strait Islander Primary Health Care Systems Evaluation)

The evaluation has a whole of system, person centred approach that not only focuses on the IAHP, but its interactions and influence on other parts of the PHC and wider health system. The evaluation will assess the appropriateness and effectiveness of the IAHP, and actively support the health system to produce sustained improvements in service delivery and health outcomes for Aboriginal and Torres Strait Islander people.

The evaluation team (managed by Allen + Clarke) would like to thank the Aboriginal and Torres Strait Islander Health Partnership Forums' Members for advice on the proposed site selection for the Aboriginal and Torres Strait Islander Primary Health Care Systems Evaluation. The evaluation team has commenced initial engagement with the proposed sites to invite them to participate in the evaluation. This process will occur progressively from September through to December 2019.

The site studies will assess the impact of the IAHP on the ground and support improvements at the local level. Benefits of participating in the evaluation include:

- Employment and training opportunities for local evaluation coordinators to support local capacity building; and
- Regular tailored evidence to support planning and continuous improvement at the local, regional, state and national levels.

The Health Sector Co-Design Group (HSCG) is continuing to guide the evaluation throughout its implementation and will next meet on 8 - 9 October 2019. Amongst other things, it will consider a co-designed approach for developing the evaluation framework to answer the evaluation questions, discuss progress of the evaluation site studies engagement, and discuss a proposed data feasibility assessment for the economic evaluation. The Productivity Commission will join HSCG on 8 October to update the Group on the Commission's work to develop an Indigenous Evaluation Strategy and hear from HSCG members on their experience in co-designing the evaluation to date. The HSCG includes membership from key stakeholder groups, such as NACCHO, the state and territory affiliates and Primary Health Networks.

Comprehensive information about the evaluation, including the latest HSCG Communique is available on the evaluation team's [website](#).

## 9. IAHP Primary Health Care Funding Model Update

The Government remains committed to the implementation of an improved funding model on 1 July 2020 that transparently distributes funding for Aboriginal Community Controlled Services (ACCHS) delivering comprehensive primary health care under the Indigenous Australians' Health Programme as fairly as possible.

The Department is working with the sector via the Comprehensive Primary Health Care Sustainability Advisory Committee to develop a model that supports ACCHS to deliver positive

health outcomes for Aboriginal and Torres Strait Islander people. This Committee has met four times since March 2019 and discussions are progressing well.

#### **10. Next Iteration of the Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013- 2023**

The Department continues to work with IPAG members towards the development of the next *Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023* (the Implementation Plan).

IPAG has established an Implementation Plan Working Group (IPWG), comprising Indigenous health experts, to steer the policy direction and ensure that the Implementation Plan is centred around Aboriginal and Torres Strait Islander perspectives.

The IPWG has met three times and will continue to meet monthly to progress the development of the Implementation Plan.

The next Implementation Plan will be aligned with the Closing the Gap refresh. The cultural determinants and social determinants of health will set the foundations for the Implementation Plan, as guided by the Australian Government report *My Life My Lead, Opportunities for strengthening approaches to the social determinants and cultural determinants of Indigenous health, report on national consultations, December 2017*.

The Lowitja Institute has been engaged to provide cultural expertise, advice and analysis on the cultural determinants of health with a view to building practical and applicable solutions into the next iteration of the Implementation Plan.

#### **11. Medicare Benefits Schedule (MBS) Review Taskforce**

As part of the MBS Review, the MBS Review Taskforce (the Taskforce) established an Aboriginal and Torres Strait Islander Health Reference Group (the Reference Group) in June 2018 to review the 21 MBS items relating to Aboriginal and Torres Strait Islander health.

The Taskforce released a draft report from the Reference Group for consultation in the first half of 2019. The feedback received was considered by the Reference Group and further informed the draft report before it was submitted to the Taskforce.

In August 2019, the Taskforce considered the Reference Group's report and feedback alongside the other reports relating to primary care including Allied Health, Mental Health, Nurse Practitioners, Participating Midwives and the General Practice and Primary Care Clinical Committee. After careful consideration, the Taskforce has agreed that additional work be undertaken to ensure consistency and an appropriate evidence base for recommendations across all primary care reports. This work is underway and is scheduled for completion prior to the end of 2019.

#### **12. Data Collection and the Health Data Portal (The Portal)**

The latest national Key Performance Indicators for Aboriginal and Torres Strait Islander primary health care (nKPI) and Online Services Report (OSR) reporting period formally closed on

15 August 2019. This was the second reporting period using the Health Data Portal (The Portal) and 100% of services reported. Feedback from health services has been very positive, in particular around the automated data validations and the QLIK analytics dashboard.

The Portal is a web based tool that is being successfully used by a number of external Department of Health stakeholders, for a range of reporting purposes. The Portal has been extended and iteratively improved to take on an Indigenous specific reporting role. The Portal provides a safe and secure tool for Aboriginal and Torres Strait Islander Health Services to submit nKPIs, OSR data, and the health care provider number data.

The Portal is compliant with all relevant Australian Government security standards. It has been developed using a co-design approach to ensure that stakeholders are able to be actively involved in the development process. AIHW will continue to play a key role in the Portal, acting as Data Custodian for processed data much in the same way that it has done so to date.

The AIHW has also been actively involved in designing and testing the portal.

Portal development is continuing to improve the user experience and make reporting as simple and effective as possible for reporting services.

Health services will continue to receive monthly updates through the dedicated Portal newsletter which has over 1,200 subscribers. If you would like to subscribe to the newsletter please send your email details to [Indigenousreporting@health.gov.au](mailto:Indigenousreporting@health.gov.au).

### 13. Australian Institute of Health and Welfare (AIHW) review of nKPI and OSR

In May 2018 the Department of Health commissioned the AIHW to conduct a comprehensive review of the nKPI and OSR data collections. The purpose of the Review was to identify the current strengths and weaknesses of the two collections as they currently exist, and to develop actionable options for how they can better meet the future needs of the funders, health services, policymakers, and researchers.

On 17 January 2019, the Indigenous Health Division received a draft Review report. The draft report was presented to the Health Services Data Advisory Group in September 2019 and will be published when finalised.

Work on developing a roadmap for implementing the nKPI recommendations is also underway.

### 14. Data Quality Assessment and Support Project – Stage 2 complete

The Data Quality Assessment and Support project (the Project) assessed aspects of data management in health services, with a focus on data capture and data management processes and procedures, use of data in internal quality improvement initiatives, and the setup and usage of clinical information systems. The Project also highlighted examples of innovation and better practice in data management at the health service level.

As part of Stage 1 of the Project, KPMG teams visited 53 participating health services around the country to review aspects of their data management practices. Each health service received a confidential report containing observations and recommendations for improvement.

Following the successful completion of the first stage of the Project, the Department engaged KPMG to undertake the second stage of the project.

By the end of Stage 2 KPMG teams:

- Visited a total of 74 health services (21 in Stage 2, building on 53 from Stage 1) to review data management practices and processes;
- Visited a total of 15 health services to assess their potential for increasing MBS billing revenue; and
- Conducted a total of 21 follow up interviews with Stage 1 health services, reviewing progress on implementing Stage 1 recommendations.

Many health services have reported impressive progress in the 12 months since Stage 1 finished. The Department received a consolidated project report in June 2019 and is now working through its recommendations.

### **15. Update on Enhanced Response to the Syphilis Outbreak Affecting Aboriginal and Torres Strait Islander Communities in Northern and Central Australia**

The Australian Government is extending the use of syphilis point-of-care testing (PoCT) kits and relevant training to 11 additional ACCHS in outbreak regions from 1 September 2019. The selected ACCHS are from: Broome (Broome and Bidyadanga), Kalgoorlie and Roebourne (WA); Mount Isa, Mareeba, Innisfail, Yarrabah, and Bamaga (Queensland); and Alice Springs and Tennant Creek (NT).

The Minister for Health, the Hon Greg Hunt MP, has approved the listing of benzathine benzylpenicillin (Bicillin L-A) on the Emergency Drug Supply Schedule (Prescribers Bag) effective from 1 September 2019. The listing of benzathine benzylpenicillin (Bicillin L-A) is intended to support the timely treatment of syphilis in non-remote settings for Aboriginal communities by providing a mechanism for these health services to have stock on site, and/or obtain supply for patients in advance of a consultation.

Links for further information:

[Enhanced response to the syphilis outbreak](#)

[Syphilis - CDNA National Guideline for Public Health Units](#)

[National Pregnancy Care Guidelines - syphilis](#)

[Listing of benzathine benzylpenicillin \(Bicillin L-A\)](#)

### **16. Connected Beginnings**

The Department of Health and the Department of Education continue working together to implement the Connected Beginnings Program.

The Department of Health is providing a further three years funding (2019-20 to 2021-22) to the eleven health organisations participating in the Program in twelve sites, which it is progressively implementing in all states and territories across Australia. Health has prioritised potential sites in Western Australia (WA) after endorsement by the WA Aboriginal Health Partnership Forum (WAAHPF).

A formative evaluation of the program was completed in June 2019. The finalised evaluation report was accepted by the Department of Health and the Department of Education in July 2019 and will be shared with participating sites shortly. The Departments are working together to progress the outcomes of the evaluation report.

### 17. National Advisory Group for Aboriginal and Torres Strait Islander Aged Care

The Department has funded a new National Advisory Group for Aboriginal and Torres Strait Islander Aged Care (NAGATSIAC), whose membership includes service providers and researchers reflecting metropolitan, regional and remote perspectives. The NAGATSIAC's role is to:

- promote the views and aspirations of older Aboriginal and Torres Strait Islander people in the development and implementation of Government ageing and aged care policies and strategies;
- provide policy advice to inform Government aged care reforms and associated program design and service delivery to ensure equitable access to aged care, which meets the needs of all older Aboriginal and Torres Strait Islander people; and
- identify priorities and contribute to research to enhance the evidence base on Aboriginal and Torres Strait Islander people's ageing experiences, aged care needs and strategies which are effective in meeting those needs.

The group's establishment fulfils an Australian Government commitment under the Aged Care Diversity Government Action Plan.

Most members of the NAGATSIAC previously advised on the development of the *Action Plan for Older Aboriginal and Torres Strait Islander people* under the Aged Care Diversity Framework. The [Action Plan](#) was launched by Minister Ken Wyatt in February 2019.

The group met with Senator the Hon Richard Colbeck, Minister for Aged Care and Senior Australians, in late August 2019. The group also hosted a workshop on 5 September 2019 with executive officers representing the Department of Health and the National Indigenous Australians Agency. Discussion focussed on person centred care in an Aboriginal and Torres Strait Islander context, aged care needs and strategies to meet these needs in the future. NAGATSIAC is now finalising its forward work plan on the basis of these discussions.

### 18. Additional Funding to Support Aboriginal and Torres Strait Islander Communities through the National Aboriginal and Torres Strait Islander Flexible Aged Care (NATSIFAC) Program

The NATSIFAC Program funds organisations to provide culturally safe aged care to older Aboriginal and Torres Strait Islander people close to home and community in remote and very remote Australia. The NATSIFAC Program operates outside of the *Aged Care Act 1997* under a block-funding model, providing stability of income and the flexibility to deliver aged care services to meet community needs.

The 2018-19 Budget provided additional funding of \$105.7 million to expand the NATSIFAC Program progressively over four years in remote and very remote Australia. Commencing in 2018, the Department is conducting targeted competitive funding rounds which are advertised through [GrantConnect](#), the Australian Government's grant information system.

The first NATSIFAC Program expansion round targeted to services providing home care aged care services in remote and very remote locations resulted an additional 512 home care places being allocated to new and existing service providers.

The second NATSIFAC Program expansion round targeted to service providing residential aged care in remote and very remote locations resulted in an additional 76 residential care places being allocated to new and existing service providers. These places will be made operational progressively over 4 years, commencing in 2019. Further expansion rounds are planned in 2020 and 2021.

The expansion of the program will create employment opportunities for local people and will support the development of communities, improving the quality and sustainability of aged care service providers in remote Australia.

#### **19. National Prescription Service (NPS) MedicineWise's Good Medicines Better Health Program**

The Department of Health is funding NPS MedicineWise to undertake a joint feasibility study with the National Aboriginal Community Controlled Health Organisation (NACCHO), Aboriginal Health Workers (including prescribers) and medical practitioners working in the Aboriginal Medical Services to redesign and reintroduce the Good Medicines Better Health Program, last delivered in 2012.

The Program has produced Quality Use of Medicines modules that were used in 50 Aboriginal Medical Services. An evaluation of the Program found that Aboriginal Health Workers and medical practitioners improved knowledge and skills immediately following, and many months after, the training. The Program is currently being updated to further address the needs of Aboriginal communities. It is anticipated that the updated program will be rolled out from January 2020.