



Acronyms

AICCHO Aboriginal and

Torres Strait Islander Community Controlled Health Organisation(s)

AICCHS Aboriginal and Torres

Strait Islander Community
Controlled Health Service(s)

AOD Alcohol and Other Drugs

CEOs Chief Executive Officers

COAG Council of Australian

Governments

CQI Continuous Quality

Improvement

DoH Department of Health

HHS Hospital and Health Services

MBS Medicare Benefits Scheme

NACCHO National Aboriginal Community

Controlled Health Organisation

NDIS National Disability Insurance

Scheme

PHN Primary Health Network(s)

PI Performance Indicator(s)

QAIHC Queensland Aboriginal and

Islander Health Council

QATSIHP Queensland Aboriginal and

Torres Strait Islander Health

Partnership

RAICCHO Regional Aboriginal and

Torres Strait Islander

Community Controlled Health

Organisation(s)







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The elimination of disparities in health and wellbeing experienced by Aboriginal and Torres Strait Islander peoples in Queensland.

A Message from the Board

The Queensland Aboriginal and Islander Health Council (QAIHC) is the peak body representing Aboriginal and Torres Strait Islander Community Controlled Health Organisations (AICCHO) in Queensland at both a state and national level. QAIHC membership comprises of Aboriginal and Torres Strait Islander Community Controlled Health Services (AICCHS) and Regional Aboriginal and Torres Strait Islander Community Controlled Health Organisations (RAICCHO) located throughout Queensland.

QAIHC and its Members are an essential part of the health development and service architecture in Queensland. AICCHS are the leading and preferred provider of effective primary health care to Aboriginal and Torres Strait Islander people, families and communities. QAIHC and its Members are the principal holders of expert knowledge of Aboriginal and Torres Strait Islander cultures and health, and apply their unique expertise to effective actions to close the gap in health disparity between Aboriginal and Torres Strait Islander and non-Indigenous Australians.

QAIHC and its Members also engage with, and work to build the capacity of, mainstream health services to enable improved health service responsiveness and culturally secure service provision to Aboriginal and Torres Strait Islander peoples. It is envisaged that this will facilitate better service access, wider choice and smooth referral pathways to improve the patient journey and the coordination of care.

QAIHC measures its performance against organisational performance indicators to ensure quality care and adherence to both state and federal funding terms and conditions.

This Strategic Plan includes organisational performance indicators aligned to our five strategic priorities that are focused on driving a sustainable, innovative and responsive Aboriginal and Torres Strait Islander Community Controlled Health Sector across Queensland.



Our Vision

The elimination of disparities in health and wellbeing experienced by Aboriginal and Torres Strait Islander peoples in Queensland.

Our Goal

To support and drive a sustainable and responsive Aboriginal and Torres Strait Islander Community Controlled Health Sector in Queensland, recognised by governments and other service providers as an essential, valued and preferred partner, and to enhance primary health care provision more broadly for Aboriginal and Torres Strait Islander people, families and communities.

This goal will be met through work under our five strategic priorities (see Page 8).

Our Values

QAIHC Values are based on feedback from its Members and Board of Directors.

We advocate for the inclusion of cultural practice across the whole health care system in Queensland

QAIHC

We demonstrate strong and uncompromised integrity in support of the highest standards of service quality and governance

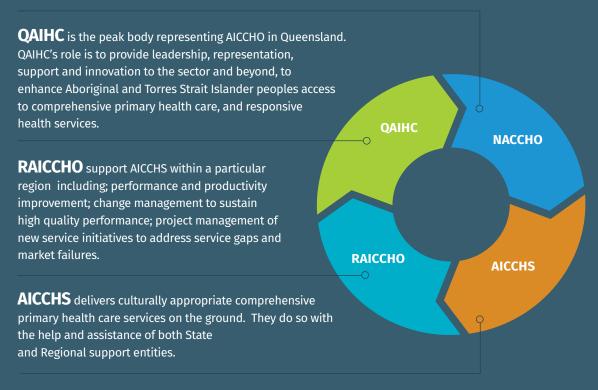
We act as thoughtful and responsible stewards of ours and our Member Services resources, knowledge, and data

We aspire to excellence that is approached through diligent effort, both individual and collective, continuous quality improvement

We act ethically, respect difference and both support and engage in open exchange of ideas, planning and programming

Our Sector

NACCHO the National Aboriginal Community Controlled Health Organisation is the national peak body for Aboriginal health. It represents the needs and interests of its Members and Affiliates in the national arena. It supports Affiliates at a jurisdictional level and works collectively with them to address shared concerns on a national basis.



QAIHC Statement of Intent

All Aboriginal and Torres Strait Islander Queenslanders have the right to access equitable and high quality health care regardless of where they live in Queensland. An equitable health system is one that is culturally competent and recognises people's connection to country and cultural wellbeing as an essential element to achieving a state of wellness. Empowering and valuing Aboriginal and Torres Strait Islander people and communities in health care is the cornerstone of Community Controlled primary health care. Community Controlled health care means that care is by and for Aboriginal and Torres Strait Islander peoples. Passion to make a difference is the foundation of Community Controlled primary health care.

QAIHC adopts the principles of Community Controlled primary health care as set out by the National Aboriginal Health Strategy (1989) as the gold standard approach in improving the health status of Aboriginal and Torres Strait Islander people. These principles encompass:

- Aboriginal and Torres Strait Islander comprehensive primary health care;
- A holistic view of health which recognises health as not just physical health but encompasses the social, spiritual, and emotional health of Aboriginal and Torres Strait Islander peoples;
- Capacity building of Community Controlled organisations and communities to support local and regional solutions for health outcomes;
- Local Aboriginal and Torres Strait Islander community control and participation;
- Working across sectors in partnership and collaboration;
- Recognising the interrelationship between good health and the social determinants of health.

Our Membership

QAIHC membership is open to all AICCHS and RAICCHO in Queensland. AICCHS are primary health care services led by local Aboriginal and Torres Strait Islander communities, delivering comprehensive and culturally appropriate primary health and wellbeing services. The QAIHC Constitution also provides for associate membership for AICCHO in the process of establishing a Community Controlled Health Service or delivery of health and wellbeing-related services to their communities.

Mamu Health Service Limited 16. Mt Isa Aboriginal Community Controlled Health Service t/a Gidgee Healing Mudth-Niyleta Aboriginal and Torres Strait **Islander Corporation** Mulungu Aboriginal Corporation Primary Health Care Service Nhulundu Heath Service - Gladstone Region 20. Health Service North Coast Aboriginal Corporation for **Community Health** Townsville Aboriginal and Torres Strait Islander Wuchopperen (23) Corporation for Health Services Apunipima (2) Wuchopperen Health Service 23. Gurriny Yealamucka (12) Mulungu (19) Yulu Burri-Ba Aboriginal Corporation for Mamu (16) **Community Health** NATSIHA (27) **QAIHC Regional Members CQRAICCHO** Central Queensland Regional TATSICHS (22) Aboriginal and Islander Community Controlled **Health Organisation** Girudala (9) Gidgee Healing (17) 26 **IUIH** Institute for Urban Indigenous Health NATSIHA Northern Aboriginal & Torres Strait ATSICHS Mackay (1) Islander Health Alliance Mudth-Niyleta (18) Injilinji (13) Bidgerdii (4) CAIHC Nhulundu (20) Members CQRAICCHO (25) QAIHC Regional Galangoor (8) CRAICCHS (3) CWAATSICH (6) Carbal (5) North Coast (21) Goondir (11) Yulu Burri Ba (24) Goolburri (10) Kalwun (14) CACH (7) Kambu (15)

- Aboriginal and Torres Strait Islander Community Health Service Mackay Ltd
- Apunipima Cape York Health Council 2.
- Cherbourg Regional Aboriginal and Islander Community Controlled Health Service
- Bidgerdii Aboriginal and Torres Strait Islander Corporation Community Health Service Central Queensland Region
- Darling Downs Shared Care Incorporated t/a Carbal Medical Centre
- Charleville Western Areas Aboriginal Torres Strait Islander Community Health Ltd
- 7. Cunnamulla Aboriginal Corporation for Health
- Galangoor Duwalami Primary Health Care Service 8.
- Girudala Community Cooperative Society Ltd 9.
- Goolburri Aboriginal Health Advancement Co Ltd 10.
- 11. **Goondir Health Services**
- Gurriny Yealamucka Health Service Aboriginal Corporation
- Injilinji Aboriginal and Torres Strait Islander 13. Corporation for Children & Youth Services
- Kalwun Health Service 14.
- 15. Kambu Aboriginal and Torres Strait Islander Corporation for Health

- Aboriginal and Islander Community Controlled

IUIH (26)

Prorites Our Strategic Profites

- Enhance the delivery of comprehensive primary health care for Aboriginal and Torres Strait Islander people.
- Enhance the capacity of Members to provide complementary services in aged care, disability services (NDIS), child and family support services, mental health, and substance misuse services.
- Shape and respond to evolving policy priorities to support Members to serve the health and social needs of Aboriginal and Torres Strait Islander communities.
- Engage as representative advocates with the Australian and Queensland governments and other key stakeholders on behalf of Aboriginal and Torres Strait Islander people, families and communities.
- Build the capacity and sustainability of the broader Aboriginal and **Torres Strait Islander health and human services workforce.**

Enhance the delivery of comprehensive primary health care for Aboriginal and Torres Strait Islander people.

How will we do this:

- Provide practical assistance to Members to enhance the use of their own clinical and health systems data and QAIHC health information data-sets to improve their service planning and delivery.
- Provide technical assistance to Members for the review of their current Information Communication Technology systems and to adopt development plans.
- Provide support to Members to achieve and maintain clinical and organisational accreditation and to support continuous quality improvement (CQI) and clinical governance.
- Support Members to build models of care that can enhance health service delivery to maximise the potential for care, organisational and community linkages, self-management, use of information management systems, and business operations.
- Implement a cultural awareness/competence training program for delivery to multiple mainstream organisations, including private general practices and other key stakeholders.

- Broker strategic and operational engagements between Primary Health Networks (PHN).
- Assist PHN to respond to their regional needs assessments and associated identification of priorities.
- Assist Members to negotiate service planning and delivery agreements with Hospital and Health Services (HHS).
- Manage the Outreach Services Program funded by the Australian Government Department of Health to facilitate appropriate and responsive engagement from private providers - allied health professionals, medical specialists, general practitioners, and other stakeholders.

Performance Indicators

- PI 1 Support to Members to enhance the use of data to improve service planning and delivery
- PI 2 Support to Members to achieve/maintain accreditation and continuing quality improvement
- PI 3 Members supported to build models of care that can enhance health service delivery



Enhance the capacity of Members to provide complementary services in aged care, disability services (NDIS), child and family support services, mental health, and substance misuse services.



Shape and respond to evolving policy priorities to support Members to serve the health and social needs of Aboriginal and Torres Strait Islander communities.

How will we do this:

- Provide information, guidance and advice to Members on government reforms in the areas of aged care, disability services (National Disability Insurance Scheme (NDIS)), child and family support services, mental health, and substance misuse services, including through state wide workshops, round tables, field visits and electronic communications.
- Assist Members to develop and implement mechanisms to enable them to participate effectively in the opportunities created by the government reforms.

Performance Indicators

PI - 4 Engage with governments and other key stakeholders on policy and program priorities

How will we do this:

- Assist Member CEOs, senior medical officers and practice managers to develop and monitor the implementation and effectiveness of CQI Action Plans.
- Establish a Queensland "Lead Clinicians Group", and provide support services to its work plan, to strengthen Member's clinical governance and to provide acceptable innovation and appropriate standardisation of quality practice.
- Provide practical and targeted assistance and guidance to Members for governance reform, financial and risk management capability enhancement, human resource management systems / policies / procedures.
- Provide advice and guidance to Members on service delivery models for new and complementary services, e.g., NDIS, aged

Performance Indicators

- PI 5 Leadership and support provided to Members to strengthen governance
- Leadership and support provided to Members to strengthen clinical governance



Engage as representative advocates with the Australian and Queensland governments and other key stakeholders on behalf of Aboriginal and Torres Strait Islander people, families and communities.



Build the capacity and sustainability of the broader **Aboriginal and Torres Strait** Islander health and human services workforce.

How will we do this:

- As part of the Queensland Aboriginal and Torres Strait Islander Health Partnership (QATSIHP) undertake joint planning and share information on health needs to inform resource allocation.
- Provide the OATSIHP with secretariat services and contribute to its effective performance.
- Provide submissions to government and stakeholders on broader health sector reform issues, performance monitoring of PHN and HHS and interpretation, and effective community engagement mechanisms.
- Seek funding for projects and programs to promote health and human services sector reforms, either alone or in consortia.
- Represent Members at strategic forums on a state and national level, and as appropriate at regional and local levels.
- Participate in relevant advisory committees, key stakeholder bodies and consultations on behalf of Members.

Performance Indicators

- PI 4 Engage with governments and other key stakeholders on policy and program priorities
- PI 7 Contribution of expertise and advice to key stakeholders

How will we do this:

- Coordinate the delivery of accredited training programs for Member's Board Directors, Office Holders and Senior Managers, in cooperation with the Australian Institute of Company Directors.
- Organise training opportunities for Member's emerging leaders to facilitate succession planning strategies.
- Incorporate the government's Medicare Benefit Scheme (MBS) reforms into the structured MBS training for Members.
- Collaborate with the Queensland Department of Health for responses to expand the scope of practice of Aboriginal and Torres Strait Islander Health Workers in alignment with changes to national registration standards and associated legislation.
- Undertake demand analyses of the training needs of staff as determined by CEOs and practice managers of Members and facilitate access to appropriate training providers.

Performance Indicators

PI - 8 Contribution to national workforce strategy specific for AICCHS workforce



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