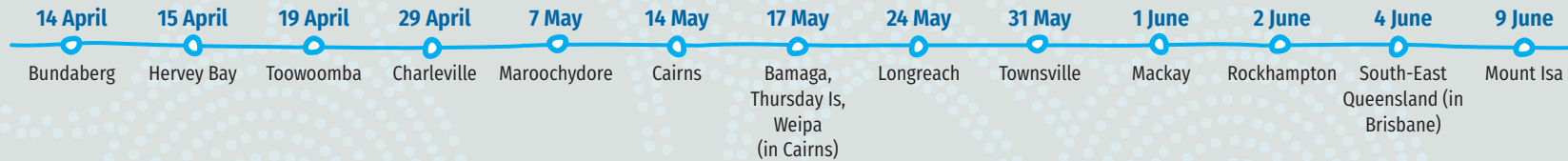


April to June 2021



450+
participants,
including
15 in
Charleville

47
written
submissions

17
workshops

IDENTIFIED PRIORITIES

Charleville

TOP 3 PRIORITY REFORMS	PRINCIPLE 1: FIRST NATIONS LEADERSHIP	PRINCIPLE 2: LOCAL AND REGIONAL DECISION-MAKING	PRINCIPLE 3: REORIENTING LOCAL HEALTH SYSTEMS	PRINCIPLE 4: CULTURAL CAPABILITY	PRINCIPLE 5: SOCIAL DETERMINANTS OF HEALTH
<p>Drive an anti-racism strategy across the health system.</p> <p>Increase Queensland Health's First Nations employment commensurate to local population or hospital presentation rates (which is greater).</p> <p>Embed cultural capability into the Clinical Services Capability Framework.</p>	<ul style="list-style-type: none"> Establish structures for First Nations voices to be heard in the mainstream health system. Aboriginal and Torres Strait Islander concepts of health need to shape local models of care. More Aboriginal and Torres Strait Islander people working in leadership and frontline positions across the health system. Ensure local health data is governed by Aboriginal and Torres Strait Islander people. 	<ul style="list-style-type: none"> Forge effective and genuine partnerships between healthcare providers and address unresolved issues. Establish regional governance mechanisms (a coalition of regional stakeholders) to ensure collaboration and co-design between providers. Identify where resources are best used across the health system and erase duplication of effort. Create a data portal to share healthcare data between local healthcare providers for planning. Require leaders and executives (Chief Executives and Chief Executive Officers) to work together and hold people accountable for delivering integrated healthcare services. The Aboriginal and Torres Strait Islander community controlled health (ATSICCHO) sector can share their experience and knowledge with other healthcare providers. 	<ul style="list-style-type: none"> Health improvements are dependent on addressing key issues for communities—health services need to be redesigned to respond to local needs and priorities. Involve First Nations peoples in decisions about the type of care they want and need. Ensure culturally safe, coordinated and streamlined care along the entire patient journey from primary through to secondary and tertiary care. Invest in long-term 'grow our own' employment pathways to create, attract and retain a skilled local Aboriginal and Torres Strait Islander workforce to meet local requirements. Create models of care that maximise the use of e-health and telehealth for people to receive treatment locally and in their own homes to minimise treatments away from home. Embrace innovative solutions to address the barriers to accessing care in rural and remote areas. Review and reflect on the past—what's worked well and what needs improving? Improve and strengthen referral, care coordination and brokerage processes across the patient journey. 	<ul style="list-style-type: none"> Proactively audit and address racism and racist practices across the health system—accountability needs strengthening. Streamline complaints processes for Aboriginal and Torres Strait Islander staff and patients. Upskill non-Indigenous staff by providing ongoing cultural onboarding and undertake regular capability checks about working in culturally safe manner. Improve communication to ensure local people understand their journey across the health system. Understand and accept that Aboriginal and Torres Strait Islander peoples have diverse perspectives and different cultural needs. Create welcoming environments in hospitals. 	<ul style="list-style-type: none"> Family wellbeing is paramount—better integration and interconnection is needed between the health system and the social determinants of health (e.g. housing and education) for the long-term wellbeing of families and communities. The local health system needs to be holistic by focusing on family and place.