

Aboriginal and Torres Strait Islander Health Collaboration

Member list as at 1 January 2023:

Jurisdiction	Jurisdictional Member	Position
Commonwealth	Gavin Matthews	First Assistant Secretary, First Nations Health Division, Department of Health and Aged Care
Queensland	s47B	Senior Director, Strategy and Policy Branch, First Nations Health Office, Department of Health
Australian Capital Territory	s47B	A/g Senior Director, Aboriginal and Torres Strait Islander Health Partnerships, Health Systems, Policy and Research, Department of Health
New South Wales	s47B	Executive Director, Centre for Aboriginal Health, NSW Ministry of Health
Tasmania	s47B	Chief Executive, Public Health Services, Department of Health
Victoria	s47B	Chief Aboriginal Health Adviser, Department of Health
Western Australia	s47B	Director, Aboriginal Health Policy Directorate, Public and Aboriginal Health Division
Northern Territory	s47B	Chief Aboriginal Health and Engagement Officer
South Australia	s47B	A/g Chief Aboriginal Health Officer, Department of Health and Wellbeing

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By the Department of Health and Aged Care

Aboriginal and Torres Strait Islander Health Collaboration

Member list as at 28 February 2025:

Jurisdiction	Jurisdictional Member	Position
Commonwealth	Melinda Turner	First Assistant Secretary, First Nations Health Division, Department of Health and Aged Care
Queensland	s47B	Senior Director, Strategy and Policy Branch, First Nations Health Office, Department of Health
Australian Capital Territory	s47B	A/g Senior Director, Aboriginal and Torres Strait Islander Health Partnerships, Health Systems, Policy and Research, Department of Health
New South Wales	s47B	Executive Director, Centre for Aboriginal Health, NSW Ministry of Health
Tasmania	s47B	A/g Chief Executive, Public Health Services Manager Healthy Communities, Public Health Services, Department of Health
Victoria	s47B	Chief Aboriginal Health Adviser, Department of Health
Western Australia	s47B	Director, Aboriginal Health Policy Directorate, Public and Aboriginal Health Division
Northern Territory	s47B	Chief Aboriginal Health and Engagement Officer
South Australia	s47B	A/g Chief Aboriginal Health Officer, Department of Health and Wellbeing
Jurisdiction	Sector Member	Position
National	s47F	Deputy Chief Executive Officer, National Aboriginal Community Controlled Health Organisation
Commonwealth	s47F	Deputy Chief Executive Officer, Health Foundation (NHLF)
Queensland	s47B	Chief Executive Officer, Queensland Aboriginal and Islander Health Council
Australian Capital Territory	s47B	Chief Executive Officer, Winnunga Nimmityjah Aboriginal Health and Community Services
New South Wales	s47B	Interim Chief Executive Officer, Aboriginal Health and Medical Research Council
Tasmania	s47B	Northern Regional Manager, Tasmanian Aboriginal Centre
Victoria	s47B	Chief Executive Officer, Victorian Aboriginal Community Controlled Health Organisation
Western Australia	s47B	Chairperson, Aboriginal Health Council of Western Australia

Aboriginal and Torres Strait Islander Health Collaboration

Northern Territory	s47B	Chief Executive Officer, Aboriginal Medical Services Alliance Northern Territory
South Australia	s47B	Chief Executive Officer, Aboriginal Health Council South Australia

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Aboriginal and Torres Strait Islander Health Collaboration

Terms of Reference

Purpose

The role of the Aboriginal and Torres Strait Islander Health Collaboration (Health Collaboration) is to provide a coordinated national approach to improving the health and wellbeing of First Nations peoples. It is one of four Collaborations established by Health Ministers nationally.

The key functions of the Health Collaboration are to:

- Ensure a nationally consistent response to the implementation of the recommendations of the Aboriginal and Torres Strait Islander Health Roundtable (Health Roundtable).
- Oversee the implementation of actions and outcomes of the Health Roundtable across the respective jurisdictions.
- Act as a key conduit to Health Ministers on First Nations' health actions and priorities, including providing strategic influence and advice to the Health Chief Executives' Forum (HCEF) and the Health Ministers' Meeting (HMM).
- Convene future Health Roundtables on a bi-annual basis with the sector, including establishing Health Roundtable priorities with Health Ministers.
- Engage with the other Health Ministers' Collaborations, as required. These are:
 - Health Workforce Collaboration
 - Health Data and Digital Transformation Collaboration
 - Genomic Collaboration

Governance

Terms of Reference	The Terms of Reference will be endorsed by the Health Ministers. Any updates must be endorsed by Health Collaboration Members and HCEF.
Term	To implement the outcomes of the Roundtable noting the complexities of the health system, and to continue to conduct a Roundtable every two years, the Health Collaboration will be active a minimum of five years. It is initially convened until 30 June 2028. The Health Collaboration will be reviewed as required and at the end of this term, with the option to extend.
Secretariat	Secretariat support is provided by the Commonwealth Department of Health and Aged Care. Secretariat arrangements will be reviewed on an annual basis.

Membership

Co-Chairs	The Health Collaboration will be co-chaired by the Commonwealth and Queensland. Chairing arrangements will be reviewed on an annual basis.
Members	Membership comprises Commonwealth, state and territory government officials. There is scope to include broader membership over time.

Responsibilities	<p>All members are required to:</p> <ul style="list-style-type: none"> • Identify as Aboriginal and/or Torres Strait Islander, where possible. • Possess skills and/or knowledge related to First Nations health and wellbeing. • Advocate / communicate to their jurisdictions and Departments on behalf of the Health Collaboration. • Contribute to the work of the Health Collaboration as required, including providing feedback on meeting documents and progressing meeting outcomes. • Understand and consider the strategic direction of the Health Collaboration, including the required alignment with HCEF and HMM. • Have an understanding of the National Agreement on Closing the Gap, particularly its Priority Reforms.
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Aboriginal and Torres Strait Islander voice and views	The Health Collaboration prioritises First Nations voices and seeks to ensure that self-determination is driving First Nations health and wellbeing decision-making in governments. Health Collaboration members commit to working with their First Nations partners in their respective jurisdictions to guide the work of the Health Collaboration.
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Consultation	The Health Collaboration will consult with other organisations as required.
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Workplan and Reporting

Workplan	<p>The Health Collaboration's overarching Workplan will guide action over the course of its term and be updated as required. An interim annual Workplan has been developed to demonstrate granular and progressive action. Annual workplans will outline proposed activities, timeframes, milestones and associated costs, together with how these will achieve the priorities of the Roundtable.</p> <p>Workplans will be submitted to HCEF for endorsement.</p>
Reporting	The Health Collaboration will report to HCEF annually on progress against Workplans.

Operation

Meeting frequency	The Health Collaboration will meet quarterly by teleconference or videoconference, or as otherwise agreed by members. Work may also be progressed out-of-session.
Proxies	Members are encouraged to identify proxies when unable to attend meetings. The proxy should hold a similar, if not equivalent government level or leadership role. Notice of proxy attendance must be provided to the Chair and Secretariat.
Observers	The Health Collaboration may invite additional internal or external stakeholders with relevant expertise and skills to attend meetings, as appropriate.

Quorum	A meeting of the Health Collaboration can take place if 75 per cent of members are present, including the Chair (or Deputy Chair) and proxies as agreed by Chair.
Decision-making	Formal decisions will require consensus from members, where a majority (75 per cent) of members agree. Any objections will be noted in meeting outcomes.
Record keeping and communications	<p>The Secretariat of the Health Collaboration will:</p> <ul style="list-style-type: none">• Manage and circulate meetings materials including agenda, agenda papers, and a record of meeting. Meeting materials will be made available to all Health Collaboration members seven days prior to meetings.• Circulate draft outcomes to Health Collaboration members within ten business days following each meeting, including a formal record of meeting and actions table.• Prepare papers on behalf of the Health Collaboration to HCEF and HMM for consideration and action, as required.• Oversee and provide a quality assurance function for the Workplan to ensure it meets reporting needs.

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Aboriginal and Torres Strait Islander Health Collaboration

Terms of Reference

Purpose

The role of the Aboriginal and Torres Strait Islander Health Collaboration (Health Collaboration) is to provide a coordinated national approach to improving the health and wellbeing of Aboriginal and Torres Strait Islander peoples. It is one of four Collaborations established by Health Ministers nationally. The Collaboration provides a forum for members to drive First Nations health priorities, in line with the outcomes of the Aboriginal and Torres Strait Islander Health Roundtable (Health Roundtable).

The key functions of the Health Collaboration are to:

- Act as a key conduit to Health Ministers on Aboriginal and Torres Strait Islander health actions and priorities, including providing strategic influence and advice to the Health Chief Executives' Forum (HCEF) and the Health Ministers' Meeting (HMM).
- Oversee the implementation of actions and outcomes of the Health Roundtable across the respective jurisdictions.
- Drive work to implement the recommendations of the Health Roundtable.
- Convene future Health Roundtables on a bi-annual basis with the sector to identify sector priorities.
- Engage across Health Ministers' governance structure including other Collaborations.

Governance

Terms of Reference	The Terms of Reference will be endorsed by the Health Ministers. Any updates must be endorsed by Health Collaboration Members and HCEF.
Term	To implement the outcomes of the Health Roundtable noting the complexities of the health system, and to continue to conduct a Health Roundtable every two years, the Health Collaboration will be active a minimum of five years. It is initially convened until 30 June 2028. The Health Collaboration will be reviewed as required and at the end of this term, with the option to extend.
Secretariat	Secretariat support is provided by the Commonwealth Department of Health and Aged Care (Commonwealth) initially. Secretariat arrangements will be rotated through the jurisdictions on a two-year basis.

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HCEF, HMM and
Health Roundtable

HMM works to progress health issues of national importance which require cross-border collaboration. It is made up of the Health Ministers of each state and territory government, including the Commonwealth Minister for Health and Aged Care. HCEF supports the HMM to deliver on national work priorities and its governance and processes align with the HMM and National Cabinet.

HCEF is an intergovernmental forum for joint decision-making and strategic policy discussions that helps to efficiently deliver health services in Australia. It is made up of the health department chief executive officer from each state and territory and the Commonwealth. The Health Collaboration informs HCEF on matters relating to Aboriginal and Torres Strait Islander Health. These Aboriginal and Torres Strait Islander Health matters are a priority of the HCEF.

The Health Roundtable is held every two years and provides a platform for key Aboriginal and Torres Strait Islander stakeholders to discuss current and future policies, strategies, and reforms. The Health Roundtable ensures that the First Nations health sector is heard and able to voice their priorities directly to Health Ministers to guide decision making.

Membership

Co-Chairs

The Health Collaboration is currently co-chaired by the Commonwealth, First Assistant Secretary for the First Nations Health Division and the Chief Executive Officer (CEO) of the National Aboriginal Community Controlled Health Organisation (NACCHO). Chairing arrangements will be reviewed every two years.

Members

Membership comprises Commonwealth, state and territory government officials, and First Nations health sector representatives.

Jurisdiction	Affiliate
National	National Aboriginal Community Controlled Health Organisation (NACCHO)
Commonwealth	Nation Indigenous Health Leadership Alliance (NIHLA) formally National Health Leadership Forum (NHLF)
Queensland	Queensland Aboriginal and Islander Health Council (QAIHC)
Australian Capital Territory	Winnunga Nimmityjah Aboriginal Health and Community Services (Winnunga)

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Victoria	Victorian Aboriginal Community Controlled Health Organisation (VACCHO)
Tasmania	Tasmanian Aboriginal Centre (TAC)
Western Australia	Aboriginal Health Council of Western Australia (AHCWA)
Northern Territory	Aboriginal Medical Services Alliance Northern Territory (AMSANT)
South Australia	Aboriginal Health Council South Australia (AHCSA)
New South Wales	Aboriginal Health and Medical Research Council (AH&MRC)

Responsibilities

All members are required to:

- Identify as Aboriginal and/or Torres Strait Islander, where possible.
- Advocate and communicate to their jurisdictions and Departments on behalf of the Health Collaboration.
- Contribute the work of the Health Collaboration, including progressing Workplan activities, providing feedback on meeting documents and progressing meeting outcomes.
- Understand and consider the strategic direction of the Aboriginal and Torres Strait Islander Health Collaboration, including the required alignment with HCEF and HMM.
- Understand the National Agreement on Closing the Gap, particularly its Priority Reforms.

Aboriginal and
Torres Strait Islander
voice and views

The Health Collaboration prioritises Aboriginal and Torres Strait Islander voices and seeks to ensure that self-determination is driving Aboriginal and Torres Strait Islander health and wellbeing decision-making in governments. Health Collaboration members commit to working with their Aboriginal and Torres Strait Islander partners in their respective jurisdictions to guide the work of the Aboriginal and Torres Strait Islander Health Collaboration.

Consultation

The Health Collaboration will consult, partner, and influence other organisations as required.

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Workplan and Reporting

Workplan	<p>The Health Collaboration's overarching Workplan will guide action over the course of its term and be updated as required. An interim annual Workplan has been developed to demonstrate granular and progressive action. Annual workplans will outline proposed activities, timeframes, milestones, and associated costs, together with how these will achieve the priorities of the Health Roundtable.</p> <p>Workplans will be submitted to HCEF for endorsement.</p>
Reporting	<p>The Aboriginal and Torres Strait Islander Health Collaboration will report to HCEF annually on progress against Workplans.</p>

Operation

Meeting frequency	<p>The Health Collaboration will meet quarterly by videoconference, or as otherwise agreed by members. Work may also be progressed out-of-session.</p>
Proxies	<p>Members are encouraged to identify proxies when unable to attend meetings. The proxy should hold a similar, or equivalent government level or leadership role. Notice of proxy attendance must be provided to the Chairs and Secretariat.</p>
Observers	<p>The Health Collaboration may invite additional internal or external stakeholders with relevant expertise and skills to attend meetings, as appropriate.</p>
Quorum	<p>A meeting of the Health Collaboration can take place if 75 per cent of members are present, including the Chair/s (or Deputy Chair) and proxies as agreed by Chair/s.</p>
Decision-making	<p>Formal decisions will require consensus from members, where a majority (75 per cent) of members agree. Any objections will be noted in meeting outcomes.</p>
Record keeping and communications	<p>The Secretariat of the Health Collaboration will:</p> <ul style="list-style-type: none"> • Manage and circulate meetings materials including agenda, agenda papers, and a record of meeting. Meeting materials will be made available to all Health Collaboration members seven days prior to meetings. • Circulate draft outcomes to Health Collaboration members within ten business days following each meeting, including a formal record of meeting and actions table. • Prepare papers on behalf of the Health Collaboration to HCEF and HMM for consideration and action, as required. • Oversee and provide a quality assurance function for the Workplan to ensure it meets reporting needs.

From: s22 on behalf of [TURNER, Melinda](#)
 To: s47B s47B @nt.gov.au";
 s47B @dhs.vic.gov.au"; s47B @health.tas.gov.au; s47B
 s47B @health.qld.gov.au; s47B @sa.gov.au"
 Cc: s47F
 Subject: Collaboration meeting 3 July 2023 - next steps [SEC=OFFICIAL]
 Date: Tuesday, 11 July 2023 5:25:02 PM
 Attachments: [Options paper - governance of First Nations health priorities .docx](#)
[image001.png](#)

Hi all,

Thank you for your time on Tuesday. It was good to get together and discuss agenda items at the upcoming Health Chief Executives' (HCEF) meeting on 14 July 2023 and the Health Ministers' Meeting (HMM) on 21 July 2023. We will provide you with a readout of how those discussions went at our next meeting.

It was also good to put some names against actions in the Workplan. Below is what we took away from those discussions (updates in red). Please let us know if we've missed anything

Priority Area	Deliverable / Milestone	Lead jurisdiction	Timeframe
1. Governance	Formally establish the Aboriginal and Torres Strait Islander Health Collaboration	Commonwealth	May 2023
	Determine options to include First Nations external stakeholders in the work of the Collaboration	All – to be discussed at next meeting	September 2023
2. Aboriginal and Torres Strait Islander Health Roundtable (Health Roundtable)	Seek agreement from Health Ministers to release the Aboriginal and Torres Strait Islander Health Roundtable report	Commonwealth	May/June 2023
	Convene a Health Roundtable by June 2024 to report back on progress against recommendations in the Roundtable report and work with Aboriginal and Torres Strait Islander health leaders to update the forward workplan for the Collaboration	South Australia/ Western Australia	June 2024
3. Health care in prisons	Stage 1: Commission work to understand the current situation regarding prisoner health, what the problems are, where are there gaps, what needs to be done to improve health care in prisons. This will include revisiting previous work done around this issue.	Commonwealth	December 2023

	The outcomes of this work will inform stage 2.		
4. Cultural safety in the health system	Develop measures that report on institutional racism within the health system, and measures access by Aboriginal and Torres Strait Islander peoples to culturally safe health services.	Northern Territory to lead, Queensland and Tasmania to support.	TBC
5. Health workforce	Seek to partner with the Health Workforce Taskforce Collaboration to progress workforce priorities identified at the Health Ministers Roundtable including: <ul style="list-style-type: none"> • Workforce Planning for consistent national approach • Develop pathways into the workforce • Support community-driven holistic workforce capability • Scopes of practice 	Queensland and New South Wales	TBC
6. Data sovereignty	Seek to partner with the Health Data and Digital Transformation Collaboration to embed Data Sovereignty principles into national policies and guidelines to ensure Aboriginal and Torres Strait Islander-led informed decision-making including: <ul style="list-style-type: none"> • Building the data sharing capability of governments and enabling the Aboriginal and Torres Strait Islander peoples • Develop policies and frameworks for existing data sources • Review existing policies and guidelines which may hinder timely access to data. 	Australian Capital Territory and Victoria	TBC

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As agreed, we will look at scheduling the next Collaboration meeting following HMM. We have included voting buttons in this email so that you can indicate a preference **for Thursday, 27 July or Friday, 28 July 2023.**

Finally, in March 2023 the Commonwealth sought feedback on how the Collaboration can best include the perspectives of the First Nations health sector in the work of the Collaboration moving forward. Please have another look over the attached paper, and we will discuss at the next meeting and hopefully land a position.

Thanks,
Mel

Melinda Turner

A/g First Assistant Secretary

First Nations Health Division | Health Strategy, First Nations and Sport Group

M: [REDACTED] s22 | E: [REDACTED] s22 @health.gov.au

Australian Government Department of Health and Aged Care

I acknowledge the Ngunnawal people whose land I live and work on, and the other traditional owners of country throughout Australia, and their continuing connection to land, sea and community

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MEETING TITLE: Aboriginal and Torres Strait Islander Health Collaboration

DATE OF MEETING: 6 November 2023

TIME: 2:00pm – 3:30pm

LOCATION: Webex

Attendees		Jurisdiction
Melinda Turner	First Assistant Secretary, First Nations Health Division, Department of Health and Aged Care	Commonwealth
s47B	Senior Director, Strategy and Policy Branch, FNHO, Department of Health	Queensland
s47B	A/Senior Director, Aboriginal and Torres Strait Islander Health Partnerships, Health Systems, Policy and Research, Department of Health	Australian Capital Territory
s47B	Principal Advisor, Strategy and Partnerships	New South Wales
s47B	A/g Chief Executive, Public Health Services Manager Healthy Communities, Public Health Services, Department of Health	Tasmania
s47B	Chief Aboriginal Health Adviser, Department of Health	Victoria
s47B	Director, Aboriginal Health Policy Directorate, Public and Aboriginal Health Division	Western Australia
Observers		
s47E(c), s47F	A/g Assistant Secretary, Policy Partnerships and Performance Branch, First Nations Health Division, Department of Health and Aged Care	Commonwealth
s47B	Manager, First Nations Health Office, Queensland Health	Queensland
s47B	Manager, Healthy Communities, Public Health Services, Department of Health	Tasmania
s47B	Manager, First Nations Health Office, Queensland Health	Queensland
s47B	WA Country Health Services	Western Australia
s47B	Manager, Aboriginal Policy Directorate, Department of Health	Western Australia
Secretariat		
s47E(c), s47F	First Nations Health Division, Department of Health and Aged Care	Commonwealth
s22	First Nations Health Division, Department of Health and Aged Care	Commonwealth
s22	First Nations Health Division, Department of Health and Aged Care	Commonwealth
Apologies		
s47B	Chief First Nations Health Officer, Department of Health	Northern Territory
s47B	Chief Aboriginal Health Officer, Department of Health	South Australia

MEETING MINUTES

Agenda Item 1 - Acknowledgement of Country

Chair s47B welcomed members to the meeting and performed an Acknowledgement of Country. s47B was an apology and no proxy was present. s47B was not present and no proxy was in attendance.

s47B advised that s47B was an apology, that he would act as proxy for this meeting, and as an observer in s47B place moving forward.

Agenda Item 2 – Check-in

Chair acknowledged the recent outcome of the Voice Referendum and recognised members' leadership throughout the lead-up and post-outcome. Chair encouraged members to share their thoughts and feelings following the outcome of the Referendum.

Jurisdictions s47B and s47B Commonwealth) reiterated their continuing commitment to treaty, with a particular focus on what they can do to move forward and using the Voice Referendum outcome as fuel for change.

Melinda Turner (Commonwealth) reaffirmed the Commonwealth's commitment to Closing the Gap and advised that they will continue to deliver on their commitments and continue working towards creating connections and listening to regional voices.

Actions:

No.	Description	Responsibility
	NIL	NIL

Agenda Item 3 – Administration – endorsement of minutes/actions

Members endorsed the 11 September 2023 Collaboration meeting minutes.

Commonwealth advised that an Actions Register will be included as a standing item under administration on future agendas. The Commonwealth noted that all outstanding actions from the previous meeting have been marked as complete, except those that will be covered in during the meeting today.

Actions:

No.	Description	Responsibility
	NIL	NIL

Agenda Item 4 – Updated Terms of Reference**Terms of Reference**

With regards to the First Nations sector membership on the Collaboration, Melinda Turner (Commonwealth) confirmed that the majority of members agreed with Option B (as outlined in Agenda Paper 4) - to include First Nations health sector representatives on the Collaboration. Members agreed to the approach outlined in the paper, including that members would nominate their jurisdictional representative out of session for inclusion in an amended Terms of Reference and that government representatives would meet separately to discuss government only matters ahead of meetings.

Co-chairs advised that they will have conversations with the s47B and s47B regarding First Nations sector representation noting they were not in attendance.

Once discussions have taken place with s47B and s47B and the Terms of Reference have been finalised, HCEF endorsement would be sought out of session.

Chair nominated Queensland Aboriginal and Islander Health Council (QAIHC) as Queensland sector representative.

Workplan

Members agreed that the existing workplan would continue to be progressed as it accurately reflects the outcomes of the 2022 Roundtable, noting that it will likely be refreshed at the next Health Roundtable with the sector.

Actions:

No.	Description	Responsibility
1	Co-chairs to have conversations with s47B out-of-session around sector representation updates and changes to the Terms of Reference.	Melinda Turner and s47B
2	Notify Members of deadlines for nominations to Terms of Reference prior to HCEF.	Secretariat
3	Amend Terms of Reference to reflect Aboriginal Torres Strait Islander Community-Controlled Sector.	Secretariat
4	Confirm timeframes to submit the Terms of Reference and workplan to HCEF.	Secretariat

Agenda Item 5 – Next Aboriginal and Torres Strait Islander Health Ministers' Roundtable

Melina Turner (Commonwealth) noted that Minister Butler will seek agreement at the 10 November Health Minister's Meeting (HMM) to bring forward the next Roundtable to early 2024. The Commonwealth agreed to take the lead on organising the Roundtable and advised that they met with Lowitja Institute to explore options for dates and locations.

s47B noted that the Roundtable will need to align with Parliamentary sitting calendars. It was raised that the 2024 APH sitting calendar indicated the back end of February 2024 will be difficult for s47B Health Minister. Members discussed the benefits of the Roundtable taking place in Canberra and agreed on its centrality as a hosting location, it was noted that ministerial availability will also need to be considered when determining the location for the Roundtable.

Actions:

No.	Description	Responsibility
5	Mel and s47B to flag Roundtable with s47B during out of session discussions.	Melinda Turner and s47B

6	Review all states and territories sitting calendars to ensure that all ministers can attend Roundtable.	Secretariat
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Agenda Item 6 - Update on Collaboration Workplan activities

Members provided verbal updates on Collaboration Workplan (Workplan) activities. Members agreed to change priorities that currently have a deadline stating 'TBC' to reflect a deadline of June 2024.

Members agreed to include a column in the Workplan for activity leads to provide written updates.

Chair provided an update on Priority 4 (Cultural Safety in the Health System), and noted that s47B was leading this work with QLD supporting. Secretariat to update Collaboration Workplan to reflect this.

Queensland noted that there has been a large amount of work taking place on Priority 5 (Health Workforce), particularly around models of care and work is underway in several clinical areas. Once this work has been finalised s47B will share findings with s47B

s47B updated members on Priority 6 (data sovereignty), noting that dates for the next round of training is being finalised, however there are limited spots for the pilot. s47B flagged that they have been working closely with s47F to progress this activity.

s47B acknowledged that s47B has taken primary lead on this activity and that they will continue to work together on Priority 6.

Actions:

No.	Description	Responsibility
7	Include a column in workplan for jurisdictional leads to include updates as work progresses.	Secretariat
8	Secretariat to update Collaboration Workplan to reflect s47B leading work on Priority 4 with s47B supporting.	Secretariat

Agenda Item 7 – Other business

Chair noted that the Productivity Commission Report on Closing the Gap findings highlighted that governments had not achieved intended progress and more work needed to be done.

s47B echoed s47B concerns around the Productivity Commission Report, noting learnt experience as they complete Phase One of the Implementation of the Aboriginal and Torres Strait Islander Agreement and flagging they have faced similar issues around accountability and change in processes.

Commonwealth provided an update on the National Health Reform Agreement (NHRA) review that is currently underway.

Chair noted it would be beneficial to include the sector in the next meeting ahead of the Roundtable, extending the invitation to Lowitja as the meeting would be utilised to sign off the Roundtable Agenda.

s47B flagged that scheduling one Collaboration Forum prior to the Roundtable would not be enough and suggested hosting a meeting in the week commencing 4th December 2023 and then another in late January 2024.

s47E(c), s47F (Commonwealth) noted that the Commonwealth will commence looking at dates for the next Collaboration Meetings and Lowitja will initiate discussions with the sector on agenda inclusions for the Roundtable. Commonwealth committed to keep Collaboration members up to date with information on the Roundtable as work progress is made.

It was agreed that future Collaboration meetings be hosted via Microsoft Teams.

Actions:

No.	Description	Responsibility
9	Seek additional Collaboration dates commencing 4th December and then another 3rd or 4th week in January – Meeting to include Lowitja and the sector representatives.	Secretariat
10	National Health Reform Agreement should be included in the forward agenda for the next Health Roundtable meeting in 2024.	Secretariat

Meeting Close – Closed 3:22pm

Next Meeting/s:

1 meeting the week of 4th December 2023

1 meeting in late January 2024

Summary of Actions

Actions:

No.	Description	Responsibility
1	Co-chairs to have conversations with s47B out-of-session around sector representation updates and changes to the Terms of Reference.	Melinda Turner and s47B
2	Notify members of deadlines for nominations to Terms of Reference prior to HCEF.	Secretariat
3	Amend Terms of Reference to reflect Aboriginal Torres Strait Islander Community-Controlled Sector.	Secretariat
4	Confirm timeframes to submit the Terms of Reference and workplan to HCEF.	Secretariat
5	Mel and s47B to flag roundtable with s47B during out of session discussions.	Melinda Turner and s47B
6	Review all states and territories sitting calendars to ensure that all ministers can attend Roundtable.	Secretariat
7	Include a column in workplan for jurisdictional leads to include updates as work progresses.	Secretariat
8	Secretariat to update Collaboration Workplan to reflect s47B leading work on Priority 4 with s47B supporting.	Secretariat
9	Seek additional Collaboration dates commencing 4th December and then another in late January – Meeting to include Lowitja Institute and sector representatives.	Secretariat
10	Health Reform Agreement should be included in the forward agenda for the next health roundtable meeting in 2024.	Secretariat

MEETING TITLE: Aboriginal and Torres Strait Islander Health Collaboration

DATE OF MEETING: 8 December 2023

TIME: 2.30pm – 3.10pm (AEDT)

LOCATION: Microsoft Teams

Attendees		Jurisdiction
Melinda Turner (Chair)	First Assistant Secretary, First Nations Health Division, Department of Health and Aged Care	Commonwealth
s47B	Senior Director, Aboriginal and Torres Strait Islander Health Partnerships, Health Systems, Policy and Research, Department of Health	Australian Capital Territory
s47B	Senior Policy Officer, Centre for Aboriginal Health	New South Wales
s47B	A/g Chief Executive, Public Health Services Manager Healthy Communities, Public Health Services, Department of Health	Tasmania
s47B	Chief Aboriginal Health Adviser, Department of Health	Victoria
s47B	Director, Aboriginal Health Policy Directorate, Public and Aboriginal Health Division	Western Australia
s47B	A/g Chief First Nations Health Officer, Northern Territory Health	Northern Territory
Observers		
s47B	Manager, First Nations Health Office, Queensland Health	Queensland
s47B	Senior Project Officer – Cultural Respect, Public Health Services	Tasmania
s47B	Director, First Nations Health Office, Queensland Health	Queensland
s47B	WA Country Health Services	Western Australia
s47E(c), s47F	A/g Assistant Secretary, First Nations Health Division, Department of Health and Aged Care	Commonwealth
Secretariat		
s47E(c), s47F	First Nations Health Division, Department of Health and Aged Care	Commonwealth
s22	First Nations Health Division, Department of Health and Aged Care	Commonwealth
s47F	First Nations Health Division, Department of Health and Aged Care	Commonwealth
Apologies		
s47B	Executive Director, Centre for Aboriginal Health, NSW Ministry of Health	New South Wales
s47B	Chief Aboriginal Health and Engagement Officer	Northern Territory
s47B	Chief First Nations Health Officer, First Nations Health Office, Queensland Health	Queensland
s47B	Manager, Healthy Communities, Public Health Services, Department of Health	Tasmania

Agenda Item 1 – Acknowledgement of Country

Chair (Mel Turner) welcomed members to the meeting and performed an Acknowledgement of Country.

It was noted that s47B s47B and s47B were not present however, had proxies in attendance. s47B was not present, and no proxy was in attendance.

Agenda Item 2 – Governance

Members endorsed the 6 November 2023 Collaboration meeting minutes. No comments from members on the Actions Register.

Actions:

No.	Description	Responsibility
	Nil.	

Agenda Item 3 – Aboriginal Community Controlled Health Sector representation nominations

Chair invited jurisdictions to nominate sector representatives for inclusion in the Collaboration's Terms of Reference. Noting the absence of jurisdictions, the Terms of Reference were not able to be endorsed at this meeting.

Chair noted that s47B and s47B have nominated their sector representatives and invited other jurisdictions to voice their representative or to have further discussions and nominate out-of-session.

s47B nominated Winnunga Nimmityjah.

s47B noted that Tasmania would provide a nomination out-of-session.

s47B will have a discussion with Chair offline.

s47B to discuss further with s47B offline, but advised they will be approaching Aboriginal Health and Medical Research Council (AHMRC) to nominate one of their members.

Chair noted a conversation will be initiated between s47B and an update will be provided at the next meeting. Chair stated that jurisdictions who have not submitted nominations are able to out-of-session.

Actions:

No.	Description	Responsibility
1	Chair to have a conversation with s47B	Commonwealth

Agenda Item 4 – Update on Workplan Activities**Health Care in Prisons**

Chair opened to members to voice any updates on the Collaboration Workplan activities and provided a brief update on Priority 3 (health care in prisons).

s47B raised Priority 6 (data sovereignty) with members and stated that since the 2022 Health Roundtable this priority has shifted. s47B noted that s47B are jointly working on this project and are working with s47F with regards to data sovereignty terms put forward by s47F team. s47B also suggested that Collaboration members could engage in this work through a workshop. Chair noted that looking at the priority from a national perspective and scale is important. Chair noted the importance of the close relationship with the ANU on this priority.

s47B noted that s47B has also been working with the ANU and s47F on data sovereignty and that work has now been socialised for feedback.

s47B would like to be brought up to speed on the work the Commonwealth is undertaking with Priority 3 (health care in prisons). Chair noted that Ben Mudaliar, Assistant Secretary will contact s47B to discuss further.

The Commonwealth noted they are working with Nous and Lowitja to bring a draft to the 2024 Health Roundtable in March 2024 and advised that Collaboration members will have opportunities to engage with review as it develops.

2024 Health Roundtable

s47E(c), s47F (Commonwealth) provided an update on the next Aboriginal and Torres Strait Islander Health Roundtable. Noted the Commonwealth are working with Lowitja to lead the work and will work across the Collaboration.

Members discussed Collaboration members' attendance and seating arrangements at the Health Roundtable, the Commonwealth will provide feedback to Lowitja. The Commonwealth confirmed that letters will be sent to health ministers and further conversations will take place between Collaboration members.

Actions:

No.	Description	Responsibility
2	Commonwealth to circulate 2024 Health Roundtable letters to members.	Commonwealth
3	Ben Mudaliar to contact s47B to provide an update on the health care in prisons review.	Commonwealth

Agenda Item 5 – Other Business

Chair confirmed next meeting is 31 January 2024.

Actions:

No.	Description	Responsibility
	Nil.	

Meeting Close

Next Meeting: 31 January 2024

Summary of Actions

Actions:		
No.	Description	Responsibility

1	Chair to have a conversation with [REDACTED] s47B [REDACTED]	Commonwealth
2	Commonwealth to circulate 2024 Health Roundtable letters to members.	Commonwealth
3	Ben Mudaliar to contact [REDACTED] s47B [REDACTED] to provide an update on the health care in prisons review.	Commonwealth

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By the Department of Health and Aged Care

Aboriginal and Torres Strait Islander Health Collaboration Forum

Chair: Commonwealth (Melinda Turner)

Date of Meeting: 8 March 2024

Time: 2:30pm – 3:30pm AEDT

Location: Webex

Attendees		Jurisdiction
Jurisdictional Members		
Melinda Turner	First Assistant Secretary, First Nations Health Division, Department of Health and Aged Care	Commonwealth
s47B	A/Senior Director, Aboriginal and Torres Strait Islander Health Partnerships, Health Systems, Policy and Research, Department of Health	Australian Capital Territory
s47B	Chief Aboriginal Health Adviser, Department of Health	Victoria
s47B	Director, Aboriginal Health Policy Directorate, Public and Aboriginal Health Division	Western Australia
s47B	Acting Director of the First Nations Health and Wellbeing Division	Northern Territory
s47B	Executive Director, Centre for Aboriginal Health, NSW Ministry of Health	New South Wales
s47B	A/g Chief Executive, Public Health Services Manager Healthy Communities, Public Health Services, Department of Health	Tasmania
Sector Representative Members		
s47F	Deputy Chief Executive Officer, National Aboriginal Community Controlled Health Organisation	Commonwealth
s47B	CEO, Aboriginal Health and Medical Research Council	New South Wales
s47B	A/Deputy CEO, Queensland Aboriginal and Islander Health Council	Queensland
s47B	Chief Executive Officer, Victorian Aboriginal Community Controlled Health Organisation	Victoria
s47B	Chairperson, Aboriginal Health Council of Western Australia	Western Australia
Observers		
s47B	Manager, First Nations Health Office, Queensland Health	Queensland
s47B	Director, First Nations Health Office, Queensland Health	Queensland
s47B	WA Country Health Services	Western Australia
s47B	Victorian Aboriginal Community Controlled Health Organisation	Victoria
s47B	Queensland Aboriginal and Islander Health Council	Queensland
s47B	Manager, Healthy Communities, Public Health Services, Department of Health	Tasmania

s47F	Executive Manager, Policy and Consulting, Lowitja Institute	Lowitja Institute
Secretariat		
s22	First Nations Health Division, Department of Health and Aged Care	Commonwealth
s22	First Nations Health Division, Department of Health and Aged Care	Commonwealth
s22	First Nations Health Division, Department of Health and Aged Care	Commonwealth
Apologies		
s47B	Senior Director, Strategy and Policy Branch, FNHO, Department of Health	Queensland
s47B	Director, Aboriginal Health, Department of Health and Wellbeing	South Australia
s47B	CEO, Aboriginal Health Council South Australia	South Australia
s47B	Senior Policy Officer, Centre for Aboriginal Health	New South Wales
s47B	Manager, Aboriginal Policy Directorate, Department of Health	Western Australia

Agenda Item 1 – Acknowledgement of Country, Welcome, Introductions and Apologies

Co-Chair (Melinda Turner - MT) welcomed members to the meeting and provided an Acknowledgement of Country.

Members noted apologies and welcomed proxies.

MT stated the focus of the meeting and thanked members for providing feedback on the 2024 Health Roundtable Agenda and Attendee List.

Agenda Item 2 – 2024 Health Roundtable

s47F (Lowitja Institute) led the agenda item. s47F thanked members for providing feedback and noted that various changes were made to the Attendee List and Agenda based on members comments. s47F noted that not all feedback has been captured in changes due to differing points and learnings from the previous Health Roundtable.

Members noted the updates to the Roundtable Event Details. No further changes were requested.

s47F provided members with a summary of feedback, acknowledging:

- Nominated speakers have been determined based on intent and purpose of each session.
- Duration of the 2024 Health Roundtable – acknowledging agenda has been shaped to allow appropriate discussion.
- Sequencing of presentations enabling Aboriginal and Torres Strait Islander voices to be heard and encouraging a platform for these voices to be heard by government representatives.
- Members concerns during discussions on actions from the 2022 Health Roundtable.
- Incorporation of consumer presentations and panel discussions.

Members acknowledged and noted feedback.

s47F ran members through the new proposed Agenda flagging the below changes to each session based on feedback and provided members with justification.

Opening

s47F ran through the changes based on feedback, noting:

- Focus areas were reduced to three rather than four. Noting session timing has been expanded based on feedback and interest in encouraging deeper discussions.
- s47F has been invited to participate for the duration of the Roundtable and s47F encouraged the extension of invitation to other Elders.
- s47F noted that opening remarks enable greater flexibility for participants to arrive and prepare.
- Encouragement that opening addresses acknowledge progress on outcomes from the 2022 Health Roundtable, noting there will no longer be a dedicated session.

s47F alleviated members queries on the number of opening addresses stating that there is the potential the number may be limited as some speakers have not been finalised.

Session 1 – Closing the Gap

- Inclusion of an address from the s47F to cover key findings from the Productivity Commission and how to deliver on commitments.
- Presentation from s47F on implementation of priority reforms.

Members noted the changes and flagged that jurisdictions are at varied stages of implementation and discussion of commitments. Chair suggested members prioritise arranging these conversations before Roundtable.

MT noted that papers will be circulated prior to provide members with background and encourage discussions during each session.

Session 2 – Building a health system which is culturally safe and free of racism

s47F noted and acknowledged members strong desire and interest in this session. s47F ran through presentations and the intended discussions based on feedback.

Members were notified that a scribe will be situated at each table to capture commentary throughout the day and influence the Roundtable Report.

Members welcomed the opportunity for s47F to provide a keynote due to the large amount of work that has taken place within jurisdictions. Members suggested that s47F reflects on the progress thus far across jurisdictions.

Members discussed the potential to swap sessions around based on current structure of objectives. Members had varied opinions on how the sessions should be structured.

Session 3 – The National Health Reform Agreement

s47F acknowledged the large amount of feedback received on this topic and ran through nominated keynote speakers and the intended outcomes which will be determined based on the framing of presentations.

s47F noted that Institute for Urban Indigenous Health Institute has been invited to participate at the Health Roundtable and encouraged other jurisdictions to extend the invitation to other peaks or organisations to encourage robust discussions, particularly during session 3.

Members queried whether the Roundtable will be the only mechanism where First Nations feedback would be sought and highlighted there is an appetite for broader feedback opportunities. MT noted that session 3 will be used as part of the consultation process, noting there will be various opportunities for consultation on the NHRA. It was highlighted that there will be opportunities for everyone to provide input and negotiations and consultation will be a timely process.

Co-chairs noted the current structure of each session and suggested that the agenda remains as stipulated. MT noted that both session two and three are very important and achieving the best outcomes within both sessions will be prioritised.

Closing

s47F ran through the changes based on feedback, noting:

- Closing time allowance had been shortened to recap and acknowledge feedback.
- Opportunities will be imbedded throughout the day for participants to report back on behalf of jurisdictions.

Members were notified that a Communique will be circulated post Health Roundtable. s47F flagged that based on learnings from the previous Health Roundtable, it was important to ensure table discussions are captured in the 2024 Health Roundtable Report.

Members agreed on the agenda as it currently stands, acknowledging that some speakers are still to be confirmed and may change depending on agreement.

Actions:

No.	Description	Responsibility
1	Lowitja to discuss keynote address with s47F based on current learnings and work that has taken place with Jurisdictions	Lowitja (s47F)
2	Circulation of Briefing Papers	Commonwealth (Secretariat)

Agenda Item 3 – Other Business

- Chair (Melinda Turner) thanked members for all the feedback provided.
- Confirmed priority to finalise Agenda by early next week.

Meeting Close

Next Meeting: TBC

Summary of Actions

Actions		
No.	Description	Responsibility
1	Lowitja to discuss keynote address with s47F based on current learnings and work that has taken place with Jurisdictions	Lowitja (s47F)
2	Circulation of Briefing Papers	Commonwealth (Secretariat)

MEETING MINUTES

Aboriginal and Torres Strait Islander Health Collaboration Forum

Chair: Commonwealth (Melinda Turner)

Date of Meeting: 14 February 2024

Time of Meeting: 1:00pm – 3:00pm AEDT

Location: Webex

Attendees		Jurisdiction
Jurisdictional Members		
Melinda Turner	First Assistant Secretary, First Nations Health Division, Department of Health and Aged Care	Commonwealth
s47B	Strategy and Policy Branch, FNHO, Department of Health	Queensland
s47B	A/Senior Director, Aboriginal and Torres Strait Islander Health Partnerships, Health Systems, Policy and Research, Department of Health	Australian Capital Territory
s47B	Centre for Aboriginal Health, NSW Ministry of Health	New South Wales
s47B	A/g Chief Executive, Public Health Services Manager Healthy Communities, Public Health Services, Department of Health	Tasmania
s47B	Chief Aboriginal Health Adviser, Department of Health	Victoria
s47B	Director, Aboriginal Health Policy Directorate, Public and Aboriginal Health Division	Western Australia
s47B	Acting Director of the First Nations Health and Wellbeing Division	Northern Territory
s47B	Director, Aboriginal Health, Department of Health and Wellbeing	South Australia
Sector Representative Members		
s47F	Deputy Chief Executive Officer, National Aboriginal Community Controlled Health Organisation (NACCHO)	Commonwealth
s47B	Manager, Queensland Aboriginal and Islander Health Council	Queensland
s47B	Aboriginal Health and Medical Research Council	New South Wales
s47B	Chief Executive Officer, Victorian Aboriginal Community Controlled Health Organisation	Victoria
s47B	CEO, Aboriginal Health Council South Australia	South Australia
Observers		
s47F	The Lowitja Institute	N/A
s47E(c), s47F	a/g Assistant Secretary, First Nations Health Division, Department of Health and Aged Care	Commonwealth
s47B	Manager, First Nations Health Office, Queensland Health	Queensland

Attendees		Jurisdiction
s47B	Manager, Healthy Communities, Public Health Services, Department of Health	Tasmania
s47B	Director, First Nations Health Office, Queensland Health	Queensland
s47B	Senior Policy Officer, Centre for Aboriginal Health	New South Wales
s47B	Policy lead, Victorian Aboriginal Community Controlled Health Organisation	Victoria
s47B	Principal Policy Adviser, Aboriginal Health Division, Department of Health	Victoria
s47B	Manager, Aboriginal Policy Directorate, Department of Health	Western Australia
Secretariat		
s47E(c), s47F	First Nations Health Division, Department of Health and Aged Care	Commonwealth
s22	First Nations Health Division, Department of Health and Aged Care	Commonwealth
s47F	First Nations Health Division, Department of Health and Aged Care	Commonwealth
s22	First Nations Health Division, Department of Health and Aged Care	Commonwealth
Apologies		
s47B	Chairperson, Aboriginal Health Council of Western Australia	Western Australia
s47B	Chief First Nations Health Officer, Queensland Health	Queensland

Agenda Item 1 – Acknowledgement of Country, Welcome, Introductions and Apologies

Chair (Mel Turner) welcomed members to the meeting and performed an Acknowledgement of Country.

Chair advised members that s47B has stepped back as Collaboration co-chair but will continue to represent Queensland at the Collaboration Forum.

s47F, Deputy CEO of NACCHO will step into the co-chair position starting from the next meeting.

It was noted that s47B will be replaced by s47F as a member starting early March. s47F will assume proxy until s47F joins.

Introductions from attendees in acknowledgement of many new members.

Agenda Item 2 – Overview of the Collaboration

Chair welcomed new sector representatives. Overview provided of how the Collaboration fits within the First Nations Health architecture (in addition to information sheet distributed ahead of meeting).

Chair noted that 2024 will be a big year for First Nations Health and acknowledged the volume of work that will be needed from the sector.

Chair advised that following the outcome of the Voice referendum all health ministers are keen to progress and elevate the work of the sector and reaffirm their commitment to Closing the Gap.

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Agenda Item 3 – Update on Health Roundtable 2024 and Draft agenda

Chair welcomed an open discussion about the Aboriginal and Torres Strait Islander Health Roundtable (Roundtable) and encouraged members to provide feedback.

s47F from the Lowitja Institute led this agenda item. s47F provided an overview of the Roundtable and noted it would be held on the 22nd of March 2024 at QT Hotel in Canberra.

s47F proposed as facilitator for the Roundtable, members agreed. The consensus is that s47F is a suitable facilitator, and it was noted s47F experience of being an engaging and interactive facilitator with the ability to promote cross-collaboration.

The Lowitja Institute has consulted with the First Nations Health sector (sector), including the National Health Leadership Forum and NACCHO, about the draft agenda and priorities of the Roundtable.

Discussions have also been held with the Commonwealth Department of Health and Aged Care regarding proposed agenda items.

s47F noted that the Collaboration group have final approval over this agenda, noting that it will then need to go to Health Ministers for endorsement.

The following agenda items were proposed to seek members' feedback:

- Improving actions under the National Agreement to Close the Gap and the Priority Reforms
- Review and reporting on actions and recommendations from the 2022 Roundtable
- National Health Reform Agreement (NHRA)
- Cultural safety

Members raised the importance of reflecting on the actions and progress from the 2022 Roundtable to see where improvements have been made.

It was agreed that State and Territory Governments and the Commonwealth Government should provide a briefing paper ahead of the meeting relating to progress on the actions and recommendations from the 2022 Roundtable.

It was agreed that the Collaboration Workplan update agenda item would include 2 presentations and the rest would be provided via papers.

Members and Chair highlighted that it would be best practice have a stronger emphasis of the Priority reforms and cultural safety, and to embed this in all aspects of the Roundtable.

It was agreed to move cultural safety above the NHRA in the agenda. Members also discussed the possibility of including a health and wellbeing item, due to the outcome of the referendum vote.

Members queried the capacity of the venue, and the potential imbalance of power when referring to numbers of government officials and sector attendees.

Members also asked that support staff be included to help sector attendees with policy discussions.

The Chair seconded these statements and requested members to provide a list of attendees to put forward to the Lowitja Institute.

Commonwealth proposed to provide members with a timeline of tasks to be completed in the lead up to the Roundtable to assist with preparation and resourcing.

Lowitja will finalise the agenda items and seek final endorsement from Collaboration members and seek suggestions of key-note speakers for the Roundtable.

Actions:		
No.	Description	Responsibility
1	State and Territory Governments and the Commonwealth Government to provide a briefing paper in relation to the actions and recommendations from 2022 Roundtable.	State and Territory Governments and the Commonwealth Government
2	Lowitja to amend Roundtable agenda and move cultural safety above the NHRA.	The Lowitja Institute
3	Members to put forward a list of potential attendees for the Roundtable.	Members
4	Commonwealth to provide members a timeline of tasks that will need to be complete in the lead up to the Roundtable.	Commonwealth
5	Lowitja to seek members final endorsement of Roundtable agenda.	Members and the Lowitja Institute
6	Lowitja to seek members suggestions of keynote speakers for the Roundtable.	Members and the Lowitja Institute
<u>Agenda Item 4 – Governance</u>		
The Chair noted that many members are new to the Collaboration Forum.		
The Chair asked ongoing members to provide comments or amendments to the 8 December 2023 minutes via email to the secretariat team out of session.		
<u>Agenda Item 5 – Update on Workplan Activities</u>		
s47B noted the upcoming state election and that they will be in caretaker mode at the time of the Roundtable. They will provide updates out of session.		
The Chair noted that after the Roundtable, Collaboration members will be required to update and finalise the Terms of Reference and the Workplan.		
The Chair proposed that the Collaboration meet fortnightly to keep members informed about actions leading up to the Roundtable. Members agreed noting capacity to attend. The Chair advised that if members do not have availability, that proxies are invited to attend.		
Actions:		
No.	Description	Responsibility
7	Collaboration to hold fortnightly meetings in the lead up to the Roundtable.	Members
8	Members to provide updates on the Workplan.	Members
9	Circulation of revised Terms of Reference for endorsement post 2024 Health Roundtable.	Commonwealth (Secretariat)
<u>Meeting Close</u>		
<u>Next Meeting: TBC</u>		

Summary of Actions

Actions		
No.	Description	Responsibility
1	State and Territory Governments and the Commonwealth Government to provide a briefing paper in relation to the actions and recommendations from 2022 Roundtable.	State and Territory Governments and the Commonwealth Government
2	Lowitja to amend Roundtable agenda and move cultural safety above the NHRA.	The Lowitja Institute

3	Members to put forward a list of potential attendees for the Roundtable.	Members
4	Commonwealth to provide members a timeline of tasks that will need to be complete in the lead up to the Roundtable.	Commonwealth
5	Lowitja to seek members final endorsement of Roundtable agenda.	Members and The Lowitja Institute
6	Lowitja to seek members suggestions of keynote speakers for the Roundtable.	Members and The Lowitja Institute
7	Collaboration to hold fortnightly meetings in the lead up to the Roundtable.	Members
8	Members to provide updates on the Workplan.	Members
9	Circulation of revised Terms of Reference for endorsement post 2024 Health Roundtable.	Commonwealth (Secretariat)

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By the Department of Health and Aged Care

MEETING TITLE: Aboriginal and Torres Strait Islander Health Collaboration

DATE OF MEETING: Monday 11 September 2023

TIME: 3pm-4pm AEST

LOCATION: Webex

Attendees		Jurisdiction
Melinda Turner	First Assistant Secretary, First Nations Health Division, Department of Health and Aged Care	Commonwealth
s47B	Senior Director, Strategy and Policy Branch, FNHO, Department of Health	Queensland
s47B	A/Senior Director, Aboriginal and Torres Strait Islander Health Partnerships, Health Systems, Policy and Research, Department of Health	Australian Capital Territory
s47B	Principal Advisor, Strategy and Partnerships	New South Wales
s47B	Director, Aboriginal Health, Department of Health and Wellbeing	South Australia
s47B	Chief Executive, Public Health Services Manager Healthy Communities, Public Health Services, Department of Health	Tasmania
s47B	Chief Aboriginal Health Adviser, Department of Health	Victoria
s47B	Director, Aboriginal Health Policy Directorate, Public and Aboriginal Health Division	Western Australia
Observers		
s47E(c), s47F	A/g Assistant Secretary, Policy Partnerships and Performance Branch, First Nations Health Division, Department of Health and Aged Care	Commonwealth
s47B	Director, First Nations Health Office, Queensland Health	Queensland
s47B	Queensland Health	Queensland
s47B	NSW Ministry of Health	New South Wales
s47B	WA Country Health Services	Western Australia
Secretariat		
s22	Assistant Director, Partnerships and Engagement Section, First Nations Health Division, Department of Health and Aged Care	Commonwealth

Agenda Item 1 - Acknowledgement of Country

Chair welcomed members to the meeting and outlined apologies. Chair confirmed permanent position as First Assistant Secretary in First Nations Division within the Department of Health and Aged Care. Chair outlined the agenda for the meeting and highlighted sector representation decision being a key priority at this meeting.

Chair noted co-chair s47B and s47B as an apology

s47B introduced a new starter in their team, s47B

s47B stated proxy for s47B representing s47B

Agenda Item 2 - First Nations representation decision

Chair noted that members received the paper out-of-session with the governance options listed. Chair invited members to confirm their position.

s47B confirmed s47B preference is Option B.

s47B expressed that s47B Health have consulted with Aboriginal Health Council of Western Australia (AHCWA) who are keen to be a part of the Collaboration with either Option A or B.

s47B stated the position of the s47B noting the smaller number of ACCHOS and ACCHSs and highlighted the burden of consultation felt for this reason. s47B confirmed that in their context, Option D makes more sense however, Option B does seem like a more universally acceptable outcome of which the s47B would support.

s47B confirmed s47B would like to choose Option B and stated any other option would seem to move against what they're doing in Victoria and not be seen as inclusive.

s47B confirmed Option B and stated this meets the principles of partnership.

s47B stated that s47B is proceeding with a Voice to Parliament and expressed that community-controlled sector are feeling the burden of consultation and confirmed Option A would be the most suitable for s47B.

s47B stated that the Aboriginal Health and Medical Research Council (AH&MRC) have had a recent change in leadership. As such, they have not yet had time to discuss with them.

Chair confirmed that Commonwealth would seek their stance from s47B OOS and following this Chairs will discuss and provide a final update on the decision to members OOS and prior to the November meeting.

Actions:

No.	Description	Responsibility
1	Commonwealth to seek s47B preference on the sector representation decision.	Secretariat.
2	s47B to confirm preference on the sector representation decision and report back to Secretariat.	s47B
3	Co-chairs to have a discussion once all members preferences have been accounted for.	Co-chairs.

4	Commonwealth to provide final update on sector representation to members. Prior to the November meeting	Secretariat.
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Agenda Item 3 - Discuss Health Ministers' Meeting outcomes.

Chair provided members with an overview of what was discussed at the recent Health Ministers Meeting on 21 July 2023. Chair stated that NACCHO CEO s47F and Assistant Minister McCarthy were invited to attend to speak to the First Nations Health Priorities item where Assistant Minister McCarthy noted that the Collaborations Workplan includes cultural safety and emphasised the importance of this for patients and staff within the healthcare sector. Chair also raised that Assistant Minister McCarthy noted the importance of workforce and data sovereignty being key areas of the Workplan and that Health Ministers agreed to hold the next Aboriginal and Torres Strait Islander Health Roundtable in mid-2024. Chair noted that Health Ministers discussed the importance of cultural safety in closing the gap and agreed on the urgent need to address the unacceptable rates of preventable diseases. Chair opened to members for discussion.

s47B sought further advice from the Commonwealth on the National Health Reform Agreement (NHRA) and questioned if states and territories will have an opportunity to engage. Chair agreed to confirm this with responsible area of First Nations Division and report back to members OOS.

Members discussed cultural safety and expressed that it is used in different contexts throughout jurisdictions. Chair noted that this conversation must continue.

s47B expressed the responsibility of cultural safety sits within primary health care and noted that 70% of their population in s47B choose to visit a non-ACCHO. s47B

Commonwealth confirmed that this money will be going to ACCHS however will provide more information to members OOS. Chair confirmed that this is a part of a bigger mental health package.

Actions:

No.	Description	Responsibility
5	Commonwealth to provide an update to members on potential opportunities in engaging with the National Health Reform Agreement and report back to members OOS.	Secretariat.
6	Commonwealth to provide members OOS with an update on the mental health support for the Voice.	Secretariat.

Agenda Item 4 - Consideration of HMM out-of-session item: Out-of-Home care

Chair provided members with an update on the Out-of-Home Care (OOHC) discussion at the July Health Ministers' Meeting where Health Ministers' agreed that urgent work must be done to improve health outcomes for First Nations children in the child protection system. Chair noted that the Collaboration is well placed to consider this issue in its role as a key conduit to Health Ministers' on First Nations' health actions and priorities including providing strategic influence and advice to the Health Ministers' Meeting. Chair expressed that item was taken to Health Ministers' as this is a big priority of the Minister of Health and Aged Care. Chair welcomed member views, comments and options that may be explored for increasing health checks for First Nation children in out-of-home care.

Members discussed the 715 health checks and expressed their concerns which varies for each jurisdiction. s47B expressed that this is a complicated space and highlighted the difference between agencies and government concerning this priority. s47B expressed that ACCHOs deliver more than just health services and stated the timely opportunity to do things differently. s47B also stated that s47B has the highest rate in the country and confirmed this is a priority for the state and their minister.

s47B raised s47B established Health Navigator program which is an MOU between the government and the community/justice services. s47B expressed this is a wide and varied process which involves coordinating and supporting people accessing different support across varying systems from immunisation health to mental health. s47B also stated that women and newborn care is becoming an issue which replicates issues as the staff managing these services also need assistance.

s47B echoed s47B comments and expressed that the s47B is currently prioritising birthing on country. s47B stressed the importance of pre and post-natal support for young mums as there is a strong narrative from reports from community which state that young mums are traveling to s47B to have their children so their children aren't removed.

s47B questioned how to assist foster care providers to get access to the health system in a better way. s47B explained this is how s47B are progressing with their health navigator's program. s47B expressed that the environment has changed since the national review four years ago of children's care when in care. s47B stated that s47B has a Chief Child Protection Officer that leads this work and expressed if this work is pursued through the Collaboration s47B will need to link in that officer. s47B also made note of the Royal Commission into Early Childhood Education and Care.

s47B raised the s47B OOH Health Pathway which is a joint initiative of Family and Community Services (FACS) and s47B Health. s47B mentioned this initiative helps the process as children who are out of care for more than 90 days can access this program. s47B also stated s47B Health has staff who provide this information to FACS, and a recent evaluation has shown it is working quite well. s47B is unsure whether this includes 715 health checks and stated there is an opportunity for s47B to better monitor 715 health checks.

s47B stated that s47B Department of Health works closely with Department of Education, Children and Young People to ensure all children in out of home care receive health checks. s47B is also establishing Kids Care Clinics to provide assessments and care to vulnerable children. The clinics will offer comprehensive health assessments within local communities, with a focus on early identification of health and wellbeing concerns. s47B is also participating in Safe and Supported: the National Framework for Protecting Australia's Children 2021-2031 and this will guide further responses in this area.

s47B provided a [link](#) through the chat function of the meeting and expressed that increases in health assessments, such as 715 health checks, provide an opportunity to ensure that increased episodes of care also translate into greater experiences of follow-up care.

Chair raised awareness that there are other departments who undertake this priority and stressed that each jurisdiction is different. Chair stated OOH is a clear priority across all states and there is a need to identify what governments can do going forward to come together.

s47B questioned if OOH fits appropriately within the National Aboriginal and Torres Strait Islander Health Plan. Chair stated that Commonwealth will consider this.

s47B expressed the demand felt on services with assessments within s47B and highlighted the global shortage of the professionals needed.

Chair noted that waitlists are consistently an issue across all jurisdictions. Chair invited members to phone or email through any questions and/or ideas of a way forward.

Actions:

No.	Description	Responsibility
7	Commonwealth to go back to area leading the OOH work and raise discussions which took place on 11 September 2023 and provide a further update to members OOS.	Secretariat.

Agenda Item 5 - Terms of Reference and Workplan SA changes noted OOS

Chair noted that at the July HCEF meeting s47B felt that their edits were not taken into proper consideration. The spelling of Aboriginal and Torres Strait Islander in full was noted. Members had no further comments on the edits made by s47B

s47B questioned the possibility of a face-to-face Collaboration meeting when discussing the meeting frequency within the Terms of Reference. Chair stated that members agreed to one face-to-face meeting per year. Chair confirmed that the duration of online meetings will be between 60 – 90 minutes and suggested the face-to-face meeting be a full day. No further comments from members.

Actions:

No.	Description	Responsibility
8	Secretariat to arrange a face-to-face meeting in 2024.	Secretariat.

Agenda Item 5 cont. Collaboration Workplan activities (by exception)

Chair asked willing jurisdictions to provide an update on Collaboration Workplan activities. s47B raised that the group needs to establish a Roundtable lead for the Aboriginal and Torres Strait Islander Health Roundtable (the Roundtable). Chair confirmed that s47B and s47B are not well placed to take on the Roundtable task for 2024. s47B stated s47B are happy to share learnings from organising the Roundtable in 2022.

Chair requested that jurisdictions have internal discussions and stated the Commonwealth is happy to assist.

Chair confirmed that an update of Workplan activities will be a standing item on future Collaboration agendas and it is expected that jurisdictions to provide updates to the group.

Chair provided jurisdictions with an update on the Healthcare in Prisons Workplan activity and explained the Department will approach potential providers for the Review with a Request for Quote (RFQ) soon. Chair explained there are two stages of the Review. Stage one will commence from October 2023 to December 2023 and the findings from Stage One will inform Stage Two. Stage Two will encompass a final report and recommendations which will be presented to the Roundtable. Chair confirmed that a further update on Healthcare in Prisons will be provided at the next Collaboration meeting.

No further comments from members.

Actions:

No.	Description	Responsibility
9	Secretariat to email jurisdictions and seek feedback on Roundtable responsibility.	Secretariat.
10	Secretariat to add 'Update on Workplan activities' as a standing item at Collaboration meetings.	Secretariat.

Agenda Item 6 – Other business

Chair opened to members to raise any issues not included on the agenda.

s47B shared a training with the group which is taking place in Canberra on Thursday 14 and Friday 15 September and invited one spot to participate in the training. s47B explained this training is a pilot training for indigenous sovereignty and governance and Victoria are co-leading this training. Chair asked s47B for an email with further information.

Members briefly discussed the recent productivity commission report and raised the opportunity of potential links with the Collaboration's Workplan. It was agreed that co-chairs would discuss the report and add to the agenda for discussion at the next Collaboration meeting.		
Actions:		
No.	Description	Responsibility
11	s47B to send information to secretariat on the indigenous sovereignty and governance training and to include s47B in the email for visibility.	s47B
12	Secretariat to provide members OOS with further information on the update on Healthcare in Prisons.	Secretariat.
13	Productivity commission discussion to be added to the agenda for the next Collaboration meeting.	Secretariat.
Meeting Close		
Next Meeting: Working through dates for later October/early November.		

Summary of Actions

Actions:		
No.	Description	Responsibility
1	Commonwealth to seek Northern Territory preference on the sector representation decision.	Secretariat.
2	s47B to confirm preference on the sector representation decision and report back to Secretariat.	s47B
3	Co-chairs to have a discussion once all members preferences have been accounted for.	Co-chairs.
4	Commonwealth to provide final update on sector representation to members (prior to the November meeting).	Secretariat.
5	Commonwealth to provide an update to members on potential opportunities in engaging with the National Health Reform Agreement.	Secretariat.
6	Commonwealth to provide members OOS with an update on the mental health support for the Voice.	Secretariat.
7	Commonwealth to go back to area leading the OOHC work and raise discussions which took place on 11 September 2023 and provide a further update to members OOS.	Secretariat.
8	Secretariat to arrange a face-to-face meeting in 2024.	Secretariat.
9	Secretariat to email jurisdictions and seek feedback on Roundtable responsibility.	Secretariat.
10	Secretariat to add 'Update on Workplan activities' as a standing item at Collaboration meetings.	Secretariat.
11	s47B to send information to secretariat on the indigenous sovereignty and governance training and to include s47B in the email for visibility.	s47B
12	Secretariat to provide members OOS with further information on the update on Healthcare in Prisons.	Secretariat.
13	Productivity commission discussion to be added to the agenda for the next Collaboration meeting.	Secretariat.

Aboriginal and Torres Strait Islander Health Collaboration

Chair: Commonwealth (Melinda Turner) and National Aboriginal Community Controlled Health Organisation (s47F)

Date of Meeting: 22 August 2024

Time: 2:30pm – 4.00pm AEDT

Location: Videoconference – Microsoft Teams

Attendees		Jurisdiction
Jurisdictional Members		
Melinda Turner	First Assistant Secretary, First Nations Health Division, Department of Health and Aged Care	Commonwealth
s47B	First Nations Health Office, Queensland Health	Queensland
s47B	A/g Senior Director, Aboriginal and Torres Strait Islander Health Partnerships, Health Systems, Policy and Research, Department of Health	Australian Capital Territory
s47B	Executive Director, Centre for Aboriginal Health, NSW Ministry of Health	New South Wales
s47B	A/g Chief Executive, Public Health Services Manager Healthy Communities, Public Health Services, Department of Health	Tasmania
s47B	Director, Aboriginal Health Policy Directorate, Public and Aboriginal Health Division	Western Australia
s47B	Chief Aboriginal Health and Engagement Officer	Northern Territory
s47B	A/g Chief Aboriginal Health Officer, Department of Health and Wellbeing	South Australia
Sector Representative Members		
s47F	Deputy Chief Executive Officer, National Aboriginal Community Controlled Health Organisation	National
s47B	Chief Executive Officer, Queensland Aboriginal and Islander Health Council	Queensland
s47B	Chief Executive Officer, Winnunga Nimmityjah Aboriginal Health and Community Services	Australian Capital Territory
s47B	Interim Chief Executive Officer, Aboriginal Health and Medical Research Council	New South Wales
s47B	Chief Executive Officer, Victorian Aboriginal Community Controlled Health Organisation	Victoria
s47B	Chief Executive Officer, Aboriginal Medical Services Alliance Northern Territory	Northern Territory
Observers		
s47B	Director, First Nations Health Office, Queensland Health	Queensland
s47B	First Nations Health Office, Queensland Health	Queensland
Chantal Jackson	Assistant Secretary, First Nations Health Division, Department of Health and Aged Care	Commonwealth
Ben Mudaliar	Assistant Secretary, First Nations Health Division, Department of Health and Aged Care	Commonwealth
s47B	Aboriginal Health Policy Directorate, Public and Aboriginal Health Division	Western Australia

s47B	Manager, Healthy Communities, Public Health Services, Department of Health	Tasmania
s47B	Victorian Aboriginal Community Controlled Health Organisation	Victoria
s47B	Senior Policy Officer, Centre for Aboriginal Health	New South Wales
s22	First Nations Health Division, Department of Health and Aged Care	Commonwealth
Secretariat		
s47E(c), s47F	First Nations Health Division, Department of Health and Aged Care	Commonwealth
s22	First Nations Health Division, Department of Health and Aged Care	Commonwealth
s22	First Nations Health Division, Department of Health and Aged Care	Commonwealth
s22	First Nations Health Division, Department of Health and Aged Care	Commonwealth
Apologies		
s47B	Chief Executive Officer, Aboriginal Health Council South Australia	South Australia
s47F	Deputy Chief Executive Officer, Health Foundation (NHLF)	Commonwealth
s47B	Chief Aboriginal Health Adviser, Department of Health	Victoria
s47B	Senior Director, Strategy and Policy Branch, FNHO, Department of Health	Queensland
s47B	Chairperson, Aboriginal Health Council of Western Australia	Western Australia

Agenda Item 1 – Welcome, Introductions and Apologies

Co-chair welcomed members to the meeting and provided an Acknowledgement of Country.

- Co-chair stated the focus of the meeting and noted apologies and proxies.
- Co-chairs noted that due to the large focus on the National Health Reform Agreement (NHRA) it has been some time since the Health Collaboration has met, and thanked members for their participation and patience.

Actions:

No.	Description	Responsibility
N/A	Nil	N/A

Agenda Item 2 – Governance

- Members endorsed previous minutes from 14 February 2024 and 8 March 2024.

Actions Register

- Members agreed to push back the agreed face-to-face Health Collaboration meeting to early 2025, post NHRA.

Terms of Reference

- Co-chair provided an update on the recent amendments to the Terms of Reference, noting the inclusion of sector representation and inclusion of details on Health Ministers Meeting (HMM) and Health Chief Executive Forum (HCEF).
- Members endorsed the Terms of Reference.

Collaboration Workplan

- Co-chair called to members to review the 2024 Health Round Table Report (Report) and how it can be used to inform the workplan.
- Members discussed the workplan moving forward and noted that most of the objectives are being progressed through the NHRA. Co-chair encouraged members to provide feedback.
- Commonwealth noted that the “Data Sovereignty” reference needs to be updated to “Governance of Indigenous Data”.

Actions:

No.	Description	Responsibility
1	Secretariat to amend outstanding action in the actions register.	Secretariat
2	Secretariat to amend “Data Sovereignty” to “Governance of Indigenous Data” in workplan.	Secretariat

Agenda Item 3 – 2024 Health Roundtable - Outcomes Report

- Co-chair discussed the Report and the feedback received so far.
- Member noted in the graphic recording there was an error under the NHRA agenda item.
- Co-chairs discussed NHRA and discussed a workplan activity to monitor the implementation of the NHRA.
- ^{s47B} noted that they have completed the [Models of Care Report](#) and shared the link to members.
- WA called for more bilateral discussions on how we can support primary health care (PHC). ^{s47B} noted that PHC is delivered by public health in remote areas in WA, particularly in places where they would like to transfer over to the ACCHS.
- Co-chair proposed a standing agenda item named “Transitioning to Community Control” for jurisdictions to discuss progress towards transitioning existing state government run clinics to Aboriginal Community Control.

Actions:		
No.	Description	Responsibility
3	Secretariat to seek if Lowitja Institute can make changes to the graphic recording.	Secretariat
4	Secretariat to populate workplan with outcomes and recommendations from Report and circulate to members for timeframes and leads.	Secretariat
5	New standing agenda item: "Transitioning to Community Control".	Secretariat
<u>Agenda Item 4 – Health Care in Prisons (HCIP) – next steps</u>		
<ul style="list-style-type: none"> Co-chair requested that all members sign the Confidentiality Agreements to enable dissemination and a more detailed engagement about the Nous report. 		
<u>National Review of First Nations Health Care in Prisons (Review)</u>		
<ul style="list-style-type: none"> Co-chair noted that the Health Chief Executives Forum (HCEF) has referred the Review report back to the Collaboration for consideration and advice, with the view to reconsidering at the next HCEF meeting on 11 October. Co-chair urged all members to provide any additional feedback as soon as possible, so the Health Collaboration can provide a consolidated response back to the HCEF. Commonwealth spoke to the Review, expressing it as an opportunity to be a catalyst for change. It was noted that Nous may be open to meet to discuss further context to the Review findings, as the independent consultants. Members noted concerns around some findings. Members would like more time and would welcome an opportunity to engage directly with Nous. Co-chair suggested that the Commonwealth circulate an email providing members information about the timeline for the review. This email will provide information highlighting key dates and relevant steps through the decision-making process to bring the report before HCEF in October and Health Ministers in December 2024. 		
Actions:		
No.	Description	Responsibility
6	HCIP team to email members highlighting key dates and relevant steps through the decision-making process.	Commonwealth
7	HCIP team to circulate information on the number of Collaboration members that were part of the consultation roundtables as part of the HCIP review	Commonwealth
<u>Agenda Item 5 – Other Business</u>		
<ul style="list-style-type: none"> Members agreed to hold an extraordinary meeting mid-September 2024 to discuss the HCIP. 		
Actions:		
No.	Description	Responsibility
8	Schedule a 1-hour meeting in September 2024 to discuss HCIP.	Secretariat/HCIP Team
<u>Meeting Close</u>		

Summary of Actions

Actions		
No.	Description	Responsibility
1	Secretariat to amend outstanding action in the actions register.	Secretariat
2	Secretariat to amend "Data Sovereignty" to "Governance of Indigenous Data" in workplan.	Secretariat
3	Secretariat to seek if Lowitja Institute can make changes to the graphic recording.	Secretariat
4	Secretariat to populate workplan with outcomes and recommendations from Report and circulate to members for timeframes and leads.	Secretariat
5	New standing agenda item: "Transitioning".	Secretariat
6	HCIP team to email members highlighting key dates and relevant steps through the decision-making process.	Ben Mudaliar/ s22
7	HCIP team to circulate information on the number of Collaboration members that were part of the consultation roundtables as part of the HCIP review	Ben Mudaliar/ s22
8	Schedule a 1-hour meeting in September 2024 to discuss HCIP.	Secretariat/HCIP Team

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