

PRIMARY HEALTH NETWORKS (PHNS) AND ABORIGINAL COMMUNITY CONTROLLED HEALTH ORGANISATIONS (ACCHOS) – GUIDING PRINCIPLES

In his *Closing the Gap* address on 10 February 2016, the Prime Minister the Hon Malcolm Turnbull MP called for government to “do things *with* Aboriginal people, not do things *to* them”.

Purpose

This document recognises the commitment by Primary Health Networks (PHNs) and Aboriginal Community Controlled Health Organisations (ACCHOs) to work together to improve access to health services and improve health outcomes for Aboriginal and Torres Strait Islander people. It provides guidance for actions to be taken by each party across six key domains: Closing the Gap; cultural competency; commissioning; engagement and representation; accountability, data and reporting; service delivery; and research.

This document has been developed in consultation with ACCHO Peak Bodies and PHNs.

Context

Aboriginal health means not just the physical well-being of an individual but refers to the social, emotional and cultural well-being of the whole Community in which each individual is able to achieve their full potential as a human being thereby bringing about the total well-being of their Community.

It is a whole of life view and includes the cyclical concept of life-death-life.

Health outcomes for Aboriginal and Torres Strait Islander people

Whilst there have been significant improvements in health outcomes over the last decade, Aboriginal and Torres Strait Islander mortality rates are currently twice that of non-Indigenous Australians. In 2010-12, the gap in life expectancy between Aboriginal and Torres Strait Islander people and non-Indigenous Australians was estimated to be 10.6 years for males and 9.5 years for females. **Our shared goal is to realise health equality by 2031.** We know that good health enables Aboriginal and Torres Strait Islander children to have the best possible start to life, and adults to lead active, full and productive lives.

The health system’s response to this challenge involves a combination of private and public state and territory providers and Indigenous-specific primary care providers (delivered primarily through ACCHOs).

The use of health services by Aboriginal and Torres Strait Islander people has increased, however access to health care is still very limited when health status is taken into account. There continues to be a need to improve access to well-run and culturally appropriate health services and programs that effectively engage with community. Services should also work with the community to improve health.

The establishment of PHNs provides an opportunity to build connections across the health system to further improve access for Aboriginal and Torres Strait Islander people to appropriately targeted care that is effective and culturally appropriate. And importantly, to

ensure that there is full and ongoing participation by Aboriginal and Torres Strait Islander people and organisations in all levels of decision-making affecting their health needs.

There are four key factors for improving quality of life and achieving health equity across all aspects of the social determinants of health:

- connection to culture
- allowing Aboriginal and Torres Strait Islander people to determine and implement the solutions
- improving cultural awareness and respect across the wider Australian population, and
- effective partnerships – Aboriginal and Torres Strait Islander health is everybody's business.

Implementation Plan for the Aboriginal and Torres Strait Islander Health Plan 2013-2023

The Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan was launched in September 2015. It outlines the actions to be taken by the Australian Government and other key stakeholders to give effect to the vision of the Health Plan:

The Australian health system is free of racism and inequality and all Aboriginal and Torres Strait Islander people have access to health services that are effective, high quality, appropriate and affordable. Together with strategies to address social inequalities and determinants of health, this provides the necessary platform to realise health equality by 2031.

PHNs and ACCHOs will work together to advance this vision, and to ensure that there is a full and ongoing participation by Aboriginal and Torres Strait Islander people and organisations in all levels of decision-making affecting their health needs.

Aboriginal Community Controlled Health Organisations

ACCHOs provide unique contributions in delivering holistic, comprehensive and culturally appropriate health care. ACCHOs are at heart and by constitution Aboriginal and/or Torres Strait Islander community organisations.

Aboriginality is intrinsic to identity and essential to communities. Aboriginal and Torres Strait Islander cultures are ancient and contemporary, dynamic, strong, vulnerable and valuable. Cultural identity is part of the strength of ACCHOs as representatives of the Aboriginal and Torres Strait Islander communities. Embracing culture and identity serves to strengthen inclusion, understanding and health.

ACCHOs have a proud history as sustainable, grass roots organisations that build community capacity for self-determination. ACCHOs are committed to assisting every Aboriginal and Torres Strait Islander person to realise their full potential as a human being and as a member of their community.

ACCHOs and their national, state and territory peak bodies and other Aboriginal and Torres Strait Islander health care services have played, and continue to play, an important role in empowering Aboriginal and Torres Strait Islander people to identify health needs and to develop and implement innovative local responses.

Primary Health Networks

PHNs have been established to increase the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes, and to improve coordination of care. PHNs will achieve these objectives by working directly with general practitioners, other primary health care providers, secondary care providers and hospitals to facilitate improved outcomes for patients.

PHNs are provided with flexible funding to enable them to respond to national priorities as determined by Government, and to respond to PHN specific priorities, identified in their needs assessments, by purchasing and commissioning required services.

PHNs already have, and will continue to have, broad engagement across their region including with ACCHOs and Aboriginal Medical Services.

Working in Partnership

At every contact with the health system, the opportunity exists to provide care that is culturally safe, high quality, responsive and accessible for all Aboriginal and Torres Strait Islander peoples. All services delivering primary health care at the local, regional and state levels should seek to optimise their engagement and involvement with Aboriginal and Torres Strait Islander people to improve health outcomes.

Working in partnership to remove barriers to good health and building the evidence around health interventions is critical for improving the health and wellbeing of Aboriginal and Torres Strait Islander people. Partnerships also provide a mechanism to effectively engage with communities on their goals and priorities for health.

An understanding of Aboriginal and Torres Strait Islander culture is important to partners who wish to engage with Aboriginal and Torres Strait Islander people effectively and as equals.

Underpinning the Guiding Principles is a shared knowledge that will ensure:

- respectful culturally sensitive consultation
- recognition that Aboriginal and Torres Strait Islander health outcomes will be achieved when Aboriginal and Torres Strait Islander people control them, and
- that commissioned service delivery will be a strengths-based approach reflecting the United Nations Declaration on the Rights of Indigenous Peoples.

Guiding principles and actions to achieve these:

**Note: If the cell in the table is merged across 'PHNs' and 'ACCHOs' it is expected that the statement is applicable to both parties.*

Principle	Role of PHNs in progressing this principle:	Role of ACCHOs in progressing this principle:
Closing the Gap	Work together to advance the Council of Australian Governments Closing the Gap (health) targets of: <ul style="list-style-type: none"> Closing the life expectancy gap within a generation (by 2031), and Halving the gap in mortality rates for Indigenous children under five within a decade (by 2018). 	
	Partner to support activities as articulated in Aboriginal and Torres Strait Islander key strategic documents (Commonwealth and state) and current strategic plans for Aboriginal and Torres Strait Islander health peak bodies.	
	Include the health needs of Aboriginal and Torres Strait Islander people and links to Closing the Gap activities in PHN developed health care and referral pathways.	Contribute to PHN development of health care and referral pathways through appropriate forums, such as the PHN Clinical Councils, PHN Boards and through being consulted by the PHN directly.
Cultural competency	<p>Demonstrate awareness of the cultural competence continuum (cross-cultural awareness, cross-cultural sensitivity, cultural competence and cultural proficiency) and understand the historical, cultural and social complexity of specific local or regional contexts in the delivery of culturally competent health services to Aboriginal and Torres Strait Islander people. Commit to acknowledging the leadership of, and gaining local knowledge from, ACCHOs and other Aboriginal and Torres Strait Islander organisations in their area.</p> <p>Commit to developing and improving cultural competence in the PHN and commissioned health services through a sustained focus on knowledge, awareness, behaviour, skills and attitudes at all levels of service in tailoring service delivery to the needs and priorities of Aboriginal and Torres Strait Islander people and communities. Commit to improving cultural competence in commissioned services by working with local Aboriginal and Torres Strait Islander organisations to enhance their capacity to provide a wide range of services to their communities.</p> <p>Have in place, or be progressing towards, a Reconciliation Action Plan endorsed by Reconciliation Australia.</p>	Take a leading role in working with PHNs and the Department and collaboration with other entities to provide guidance on the provision of clinically competent and culturally safe services (including mental health) as outlined in the Implementation Plan ¹ .

¹ Australian Government Department of Health, *Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023*, Australian Government, Canberra, 2015.

Principle	Role of PHNs in progressing this principle:	Role of ACCHOs in progressing this principle:
Commissioning	Try where possible to link in with existing measures, data collection mechanisms and reporting cycles to avoid duplication of reporting.	Work with PHNs in the planning, implementation and evaluation of projects and share appropriate data sources to inform locally responsive commissioning and planning processes (refer to accountability, data and reporting).
	Develop commissioning processes that build capacity and support Aboriginal and Torres Strait Islander organisations and which minimise the fragmentation and lack of coordination caused by competitive tendering processes. Engage to ascertain the capacity of ACCHOs prior to commissioning to inform the process for commissioning Indigenous-specific health programmes and services. This can include ACCHOs providing the service or collaborating in consortia either with other Indigenous-specific primary health care service providers or with the mainstream health system (a combination of private and public providers). Ensure commissioning processes take the needs of ACCHOs into account, are not unnecessarily burdensome and are communicated well in advance to ACCHOs. Develop strategies to overcome barriers by ACCHOs to competitively tender for funds.	Advise PHNs of capacity of ACCHOs to undertake additional activities to improve health outcomes for Aboriginal and Torres Strait Islander people and also what additional resources and support are required to provide additional services. This can include ACCHOs providing services on their own, with other Indigenous-specific primary health care service providers or with the mainstream health system (a combination of private and public providers).
	<p>In the commissioning of Indigenous-specific services the successful applicants will be required to demonstrate:</p> <ul style="list-style-type: none"> • the ability to deliver culturally appropriate services to Aboriginal and Torres Strait Islander people • how they communicate sensitively and effectively with Aboriginal and Torres Strait Islander people on health and related issues; • how Aboriginal and Torres Strait Islander people from the local community will be included in the design delivery and evaluation of appropriate services • how their service delivery is building the capacity of Aboriginal and Torres Strait Islander leadership and organisations • how their service will build Aboriginal and Torres Strait Islander employment including through developing career pathways for Indigenous people • how they have, or will develop and maintain, strong working relationships with various stakeholders, specifically Aboriginal and/or Torres Strait Islander organisations and/or community members, and • the ability to exercise the utmost discretion and demonstrate cultural awareness and respect for all Aboriginal and Torres Strait Islander 	Provide information, advice and guidance to PHNs on key success factors in clinical and population health activities of ACCHOs that the ACCHOs and/or Regional Organisations of ACCHOs have identified from their practical experiences. Provide advice to PHNs on how the PHN and ACCHOs can work together to strengthen Aboriginal and Torres Strait Islander leadership and control of service delivery and build the capacity of Aboriginal and Torres Strait Islander organisations.

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	cultural and community matters.	
	Commission Indigenous-specific health programmes and services that adhere to the Indigenous Australians' Health Program Guidelines and the PHN Program Guidelines, and align with the Implementation Plan for the <i>National Aboriginal and Torres Strait Islander Health Plan 2013-23</i> as well as the ongoing needs assessments developed and maintained by PHNs.	Respond to commissioned tenders from the PHNs and, as well, propose unsolicited, costed Indigenous-specific health programs and services that adhere to the Indigenous Australians' Health Program Guidelines and the PHN Program Guidelines, and align with the Implementation Plan for the <i>National Aboriginal and Torres Strait Islander Health Plan 2013-23</i> as well as the ongoing needs assessments developed and maintained by PHNs.
Engagement & Representation	Have broad engagement across their region including with ACCHOs (as outlined in the PHN Program Guidelines). Ensure that the ACCHO sector is consulted about all major funding streams (including targeted Aboriginal and Torres Strait Islander funding and mainstream funding).	Provide linkages to key Aboriginal and Torres Strait Islander community members, representative bodies and organisations.
		Provide representation on PHN working groups.
	Engage with Aboriginal and Torres Strait Islander health stakeholders throughout needs assessment, annual planning, designing and contracting services, including through the relevant PHN governance structures.	Engage with Aboriginal and Torres Strait Islander people, families and communities in order to ascertain their views and incorporate them in evidence-based inputs to PHNs via relevant forums, such as PHN Boards, Clinical Councils or PHN Community Advisory Committees.
	Build consistent, open and respectful working relationships through an agreed engagement/partnership model to improve health outcomes for Aboriginal and Torres Strait Islander people, families and communities in alignment with the Implementation Plan and the priorities identified in regional needs assessments.	
	Partnerships will be based on the principles of collaboration, respect for each other's role, respect for Aboriginal and Torres Strait Islander leadership and commitment to support Aboriginal and Torres Strait Islander control of service delivery where possible, a commitment to working productively and the sharing of information.	
	Set appropriate timeframes for requests and decisions where possible (including early engagement and time for deliberation and to respond to requests).	
	Provide advice about community events for consideration in planning health events and services in the PHN region and/or ACCHOs vicinity.	
	Acknowledge the role of, and engage with, Aboriginal Health Partnership Forums in regional planning where appropriate.	
Accountability, Data & Reporting	Recognise that data generated by ACCHOs is owned by ACCHOs, and arrangements and protocols are developed and agreed upon for data sharing and reporting that do not place additional reporting requirements on ACCHOs.	Provide PHNs with de-identified data analyses and/or reports on Aboriginal and Torres Strait Islander health to inform PHNs broader needs analysis, after agreement on data protocols have been reached with the PHN.
	Work together to address significant deficits in local data collections.	
	Liaise with ACCHO peak organisations before developing an agreement for the use of Aboriginal and Torres Strait Islander data with local ACCHOs, or via their jurisdictional peak body on behalf of their local ACCHO. This	Develop an agreement for the use of Aboriginal and Torres Strait Islander data with PHNs based on the principle of Aboriginal ownership of data.

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	agreement will be in alignment with the National Aboriginal and Torres Strait Islander Health Data Principles and that outlines who will have access to ACCHOs' data, how data will be used and fed back to ACCHOs and how the privacy of Aboriginal people and communities will be respected.	
	Provide annual feedback on activities and progress to address Aboriginal and Torres Strait Islander health to the Aboriginal and Torres Strait Islander communities and ACCHOs within their regions.	Facilitate the sharing of feedback on activities and progress to address Aboriginal and Torres Strait Islander health from PHNs to the Aboriginal and Torres Strait Islander communities within their service delivery regions.
	With the ACCHO sector convene an annual stocktake and forward program workshop on the full range of PHN initiatives affecting Aboriginal and Torres Strait Islander health and wellbeing including: primary health care; aged care; mental health; alcohol and other drug services; and disability services with local ACCHOs (and their Regional organisations, where appropriate).	Jointly convene an annual stocktake and forward program workshop on the full range of PHN initiatives affecting Aboriginal and Torres Strait Islander health and wellbeing including: primary health care; aged care; mental health; alcohol and other drugs services; and disability services.
Service delivery	Acknowledge and respect the essential role that ACCHOs play in delivering culturally safe, holistic models of care including comprehensive primary health care for Aboriginal and Torres Strait Islander people, and the important leadership role of the sector in improving the health and wellbeing of Aboriginal and Torres Strait Islander people; and collaborate to enhance those roles.	Acknowledge and respect the planning and commissioning roles of PHNs, and that there will at times be a need for competitive tendering arrangements. Collaborate to enhance the effectiveness of these roles.
	Inform local ACCHOs of all funded Indigenous-specific and non-Indigenous specific services in the region in a timely way.	Inform PHNs of any new funding or initiatives they undertake which may impact the communities they service so PHNs can monitor health and service needs in the community.
	Develop service linkages to enable access to all mainstream services, and in partnership with the ACCHO sector, work to improve the interface between primary health care and hospitals including through enhancement of referral pathways, improvements to the patient journey to reduce admissions and readmissions, and better information sharing including through use of shared electronic health records. Have regard to local situations, as well as to the AHMAC Health Performance Framework reports.	Respond to, as well as initiate, PHNs' practical engagement with public hospitals to construct new and /or enhance existing procedures and systems for referral pathways on admission and discharge; on shared electronic health records; and on collaborative activities to reduce avoidable hospital admissions and re-admissions of Aboriginal and Torres Strait Islander clients. Have regard to local situations, as well as to the AHMAC Health Performance Framework reports. In this context, make use of initiatives promoted through Aboriginal Health Partnership Forum at the jurisdictional level and NACCHO at the national level.
	Respect the confidentiality of ACCHOs patient information in facilitating service delivery (such as care coordination).	Facilitate timely sharing of health records with relevant staff across organisations such as care coordinators, outreach specialists and allied health practitioners whilst respecting the rights of patients to control how

Principle	Role of PHNs in progressing this principle:	Role of ACCHOs in progressing this principle:
		their own clinical information is shared.
	Work in cooperation to identify gaps and barriers to the patient journey between primary, secondary and tertiary health sectors.	
	Support the use and implementation of the My Health Record (eHealth) to assist in sharing of patient information to support timely and effective access to clinical and pharmaceutical services. Jointly review experience and identify effective solutions to increase take-up of shared patient electronic health records.	
	Share resources (expertise, information and publications) where possible to enable mainstream primary health care to access culturally appropriate information and advice. In this context, make use of initiatives promoted through Aboriginal Health Partnership Forums at the jurisdictional level and NACCHO at the national level.	
Research	Ensure, through partnership with the Aboriginal Health Sector, that the <i>Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research</i> provides guidance to researchers and Human Research Ethics Committees on the complex considerations necessary in the conception, design and conduct of appropriate research in Aboriginal and Torres Strait Islander communities (see link under Useful Resources).	

The Department	<p>Will:</p> <ul style="list-style-type: none"> • resource enablers for PHNs and ACCHOs to establish working relationships in their regions and to facilitate linkages; • work with PHNs, ACCHOs and state and territory governments to address any deficiencies in available culturally appropriate primary health care services; and • in collaboration with other entities, provide guidance on the provision of clinically competent and culturally safe services (including mental health) as outlined in the Implementation Plan.
NACCHO	<p>Will provide advice and assistance to develop a strategic approach to reduce racism in the Australian Health system and:</p> <ul style="list-style-type: none"> • encourage ACCHOs and Regional Organisations of ACCHOs to establish working relationships with PHNs in their regions; • work with the Department of Health and with ACCHOs, Regional Organisations of ACCHOs and jurisdictional peak bodies, to address any deficiencies in available culturally appropriate primary health care services; and • in collaboration with other entities, provide guidance on the provision of clinically competent and culturally safe services (including mental health) as outlined in the Implementation Plan.
State/territory Peak Bodies	<p>Will:</p> <ul style="list-style-type: none"> • encourage ACCHOs and Regional Organisations of ACCHOs to establish effective, mutually beneficial working relationships with PHNs in their regions; • work with the Department of Health, state and territory governments, and with ACCHOs and Regional Organisations of ACCHOs, to address any deficiencies in available culturally appropriate primary health care services; and • in collaboration with other entities, provide guidance on the provision of clinically competent and culturally safe services (including mental health) as outlined in the Implementation Plan.
PHNs	<p>Will:</p> <ul style="list-style-type: none"> • work with providers across the health sector, including ACCHOs, to facilitate improved outcomes for patients, particularly those at risk of poor health outcomes, including Aboriginal and Torres Strait Islander people, and to improve coordination of care; • work with ACCHOs, and Regional Organisations of ACCHOs to address deficiencies in the availability of culturally appropriate primary health care services; and • in collaboration with other entities, provide guidance on the provision of clinically competent and culturally safe services (including mental health) as outlined in the Implementation Plan.
Useful Resources to inform planning	<ul style="list-style-type: none"> • Implementation Plan for the <i>National Aboriginal and Torres Strait Islander Health Plan 2013-2023</i> • Cultural competency in the delivery of health services for Indigenous people (July 2015) http://www.aihw.gov.au/uploadedFiles/ClosingTheGap/Content/Our_publications/2015/ctgc-ip13.pdf • Engaging with Indigenous Australia: exploring the conditions for effective relationships with Aboriginal and Torres Strait Islander communities (October 2013) http://www.aihw.gov.au/uploadedFiles/ClosingTheGap/Content/Publications/2013/ctgc-ip5.pdf • <i>Values and Ethics: Guidelines for Ethical Conduct in Aboriginal and Torres Strait Islander Health Research</i> (NHMRC) https://www.nhmrc.gov.au/guidelines-publications/e52 • Closing the Gap publications: http://www.aihw.gov.au/closingthegap/publications/