

Sunshine Coast Health Service

# Aboriginal and Torres Strait Islander Health Equity Strategy Evaluation 2023-2024



**Sunshine Coast**  
Hospital and Health Service



**Queensland**  
Government

## ACKNOWLEDGEMENT OF TRADITIONAL CUSTODIANS

Sunshine Coast Health respectfully acknowledges the Traditional Custodians, the Kabi Kabi (Gubbi Gubbi) and Jinibara people on whose land we provide our services.

We also pay our respects to the Aboriginal and Torres Strait Islander Elders, past, present, and future and recognise the strength and resilience that Aboriginal and Torres Strait Islander peoples and their ancestors have displayed in laying strong foundations for the generations that follow.

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## THE GATHERING ARTWORK

The themes and colours from The Gathering artwork have been incorporated into the Sunshine Coast Health Equity artwork. This original painting completed by Aunty Betty McMahon represents community gathering into yarning circles to inspire change and highlights the importance of yarning and community.



A section of 'The Gathering' by Aunty Betty McMahon



## FOREWORD

# Message from the Senior Director, Aboriginal and Torres Strait Islander Health

Sunshine Coast Hospital and Health Service aims to transform the way healthcare is provided to Aboriginal and Torres Strait Islander people in our region. Key to the health service achieving this is the legislative requirement for all health services to co-develop and co-implement health equity strategies and implementation plans.

In January 2023, Sunshine Coast Hospital and Health Service was proud to be the first health service in Queensland to launch its Sunshine Coast Aboriginal and Torres Strait Islander Health Equity Strategy (2022-2031) and Implementation Plan (2023-2025) following robust consultation. The Aboriginal and Torres Strait Islander Health Directorate continues to work closely with our partners as we work together to address health inequities for our community.

While the past twelve months has seen significant improvement against measures outlined in the implementation plan, there is still work to be done. In total, the HHS has 23 (green) performing or completed actions, 13 (yellow) performance flags where improvement has been made but the target has not yet been achieved. Additionally, there are 8 (red) performance flags indicating minimum or no improvement has been made against the action or target.

I want to thank all who have partnered with us to improve the way healthcare is provided to Aboriginal and Torres Strait Islander people in our region. We cannot do this alone—we all have a role to play in working to address the social, cultural and economic determinants of health. We look forward to continuing our partnership with you as we walk together in our journey toward closing the gap.



**Sharon Barry**

Senior Director,  
Aboriginal and Torres Strait Islander Health  
Sunshine Coast Hospital and Health Service

**I want to thank all who have partnered with us to improve the way healthcare is provided to Aboriginal and Torres Strait Islander people in our region.**

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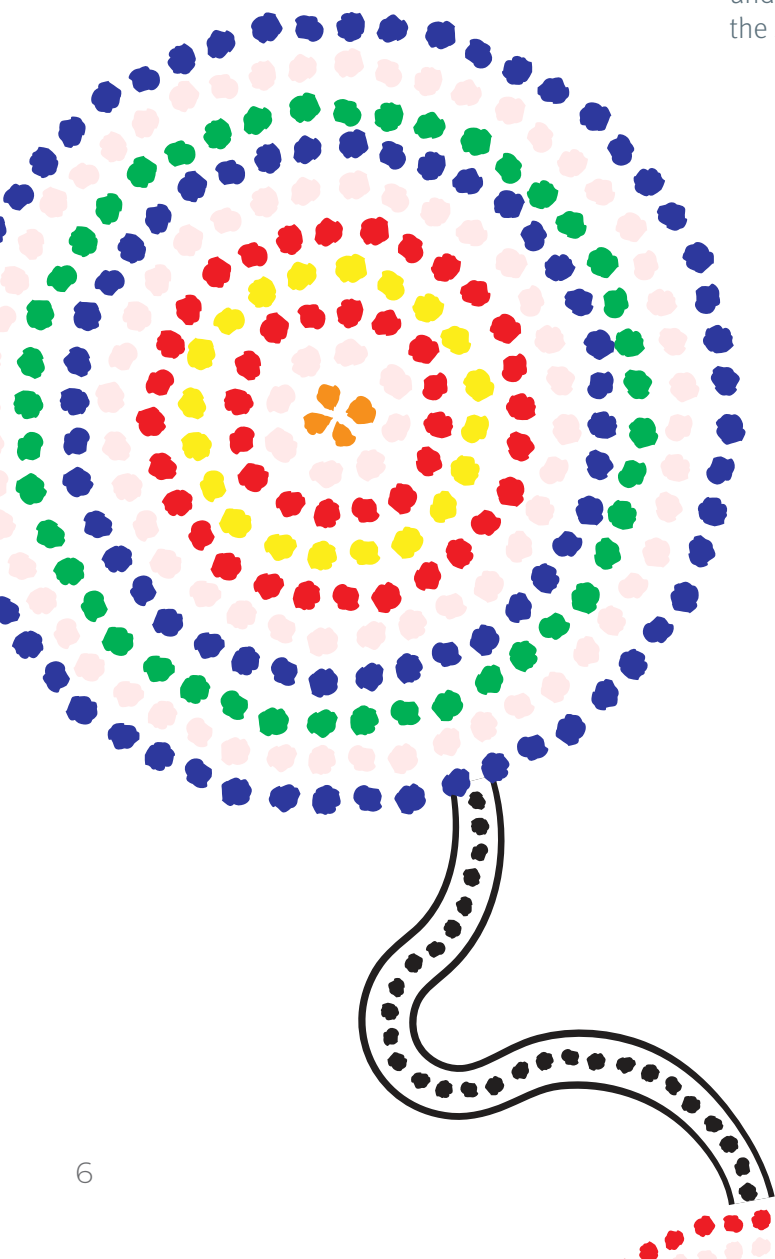
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## 1 INTRODUCTION

*Closing the gap between the Aboriginal and Torres Strait Islander population and the rest of the Australian population has been a long-term government goal since the first National Indigenous Reform Agreement, released in 2008.*

The agreement outlined priority areas for reform, including education, employment, early childhood and health. In 2020 and 2021 the Queensland Parliament passed a legislative requirement for all Hospital and Health Services (HHSs) to co-develop and co-implement a local Aboriginal and Torres Strait Islander Health Equity Strategy. The purpose of the strategy was to show clear actions and progress against the health priority reform and demonstrate improvement in the life expectancy gap between Aboriginal and Torres Strait Islander people and the rest of Queensland.

Sunshine Coast Hospital and Health Service began the Health Equity journey in 2021 with a lengthy consultation period that spanned more than six months. During this time, a total of 906 pieces of consultation material was collated and informed the actions and strategies included in the implementation plan. After a further six months of consultation and data collection, the Sunshine Coast Aboriginal and Torres Strait Islander Health Equity Strategy 2022 - 2031 and the Sunshine Coast Aboriginal and Torres Strait Islander Health Equity Implementation Plan 2022 – 2025 were both published and launched in January 2023, making Sunshine Coast Hospital and Health Service the first in the state to publish and launch both the strategy and implementation plan. Now a year on, the health service is undergoing an evaluation process to understand the successes and challenges.



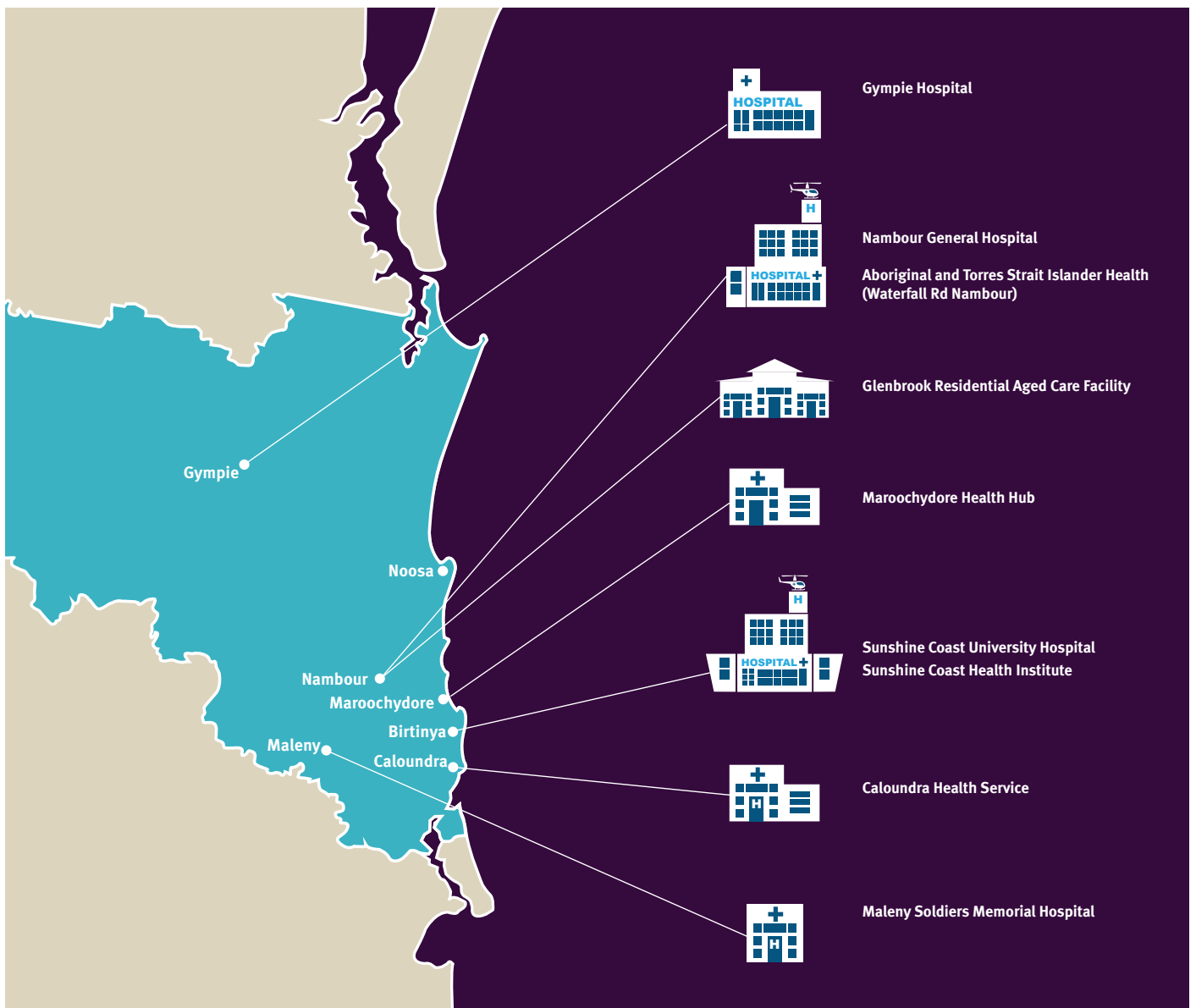
## 2 OUR REGION AND COMMUNITY

The Sunshine Coast Hospital and Health Service region includes the Sunshine Coast, Gympie and Noosa local government areas, with eight separate planning zones:

- Buderim
- Caloundra
- Gympie-Cooloola
- Maroochy
- Nambour
- Noosa
- Noosa Hinterland
- Sunshine Coast Hinterland.

Within this region, the health service offers a wide range of services operating out of eight facilities:

- Gympie Hospital
- Nambour General Hospital
- Aboriginal and Torres Strait Islander Health (Waterfall Rd, Nambour)
- Glenbrook Aged Care Facility
- Sunshine Coast University Hospital
- Caloundra Health Service
- Maleny Soldiers Memorial Hospital
- Maroochydore Health Hub.



Since the publication of the *Sunshine Coast Aboriginal and Torres Strait Islander Health Equity Implementation Plan 2022 – 2025* the Australian Bureau of Statistics (ABS) released new Census Data from the 2021 survey. This refreshed data highlights critical changes that need to be considered as part of service provision and future planning activities.

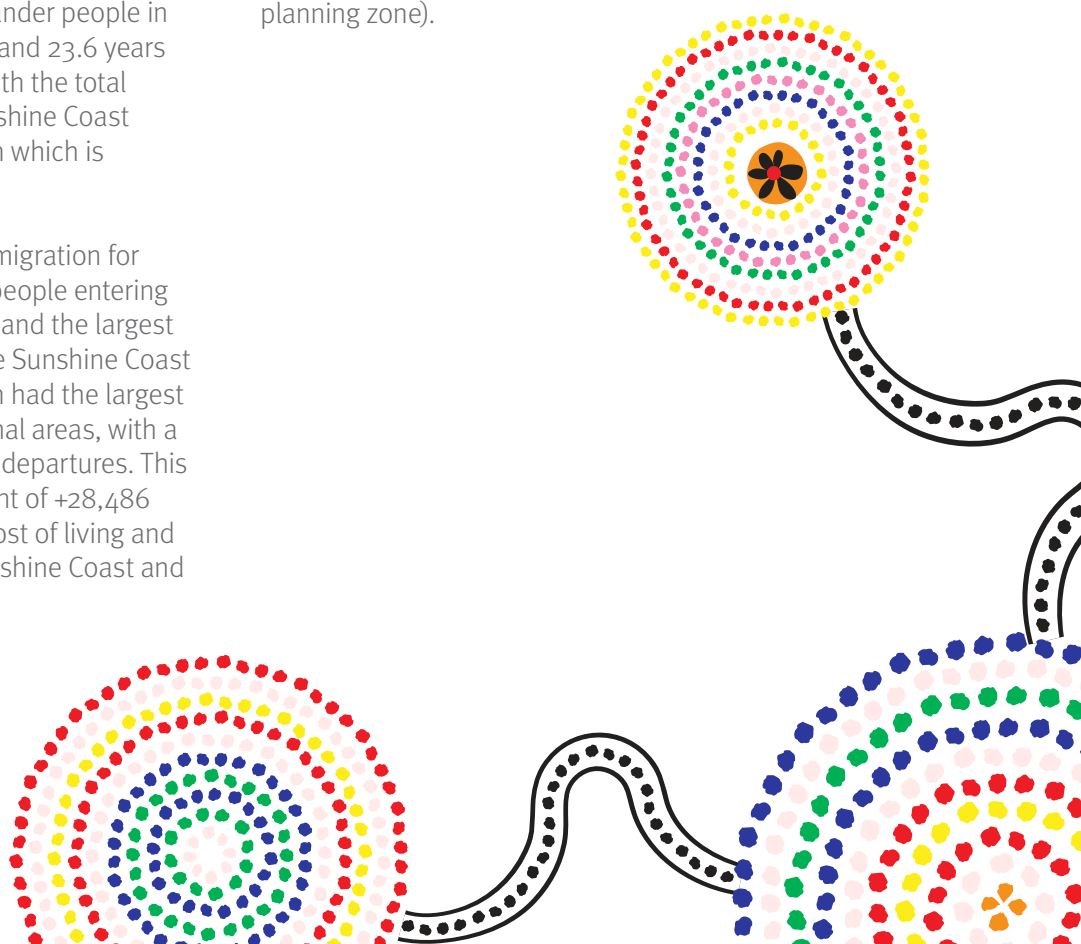
Nationally 812,728 people identified as Aboriginal and/or Torres Strait Islander which represents 3.2% of the Australian population. The Queensland percentage is higher with 4.6% (approx. 237,000 people) of people identifying as Aboriginal and/or Torres Strait Islander, this is an increase of 0.6% since the 2016 Census. In the Sunshine Coast Hospital and Health Service region, the Aboriginal and Torres Strait Islander population represents 2.6% (approx. 11,600 people) of the total population. The Queensland Local Government Areas with the highest count of Aboriginal and Torres Strait Islander residents include Brisbane (22,940) and Moreton Bay (18,616), people in these surrounding areas often access services and facilities in the Sunshine Coast Hospital and Health Service region.

Generation Z (10–24-year-olds) represents 18% of the total Australian population and 30% of the Australian Aboriginal and Torres Strait Islander population. This is reflected in the median age for Aboriginal and Torres Strait Islander people in Queensland which is 23 years old and 23.6 years old in our region. This contrasts with the total population median age in the Sunshine Coast Hospital and Health Service region which is 44.7 years old.

The 2021 Census showed the net migration for Queensland exceeded +100,000 people entering the state, an unprecedented jump and the largest of all the states and territories. The Sunshine Coast Hospital and Health Service region had the largest net migration increase of all regional areas, with a total of 71,049 arrivals and 42,563 departures. This resulted in an overall net movement of +28,486 people. This has likely impacted cost of living and housing availability within the Sunshine Coast and Gympie regions.

The three planning zones in our region with the highest population density of Aboriginal and Torres Strait Islander people include Gympie - Cooloola (4.6%), Nambour (3.5%) and the Sunshine Coast Hinterland (2.7%). Yet the planning zones with the greatest amount of Aboriginal and Torres Strait Islander residents include Caloundra (approx. 2336 people), Gympie – Cooloola (approx. 2326 people), Nambour (approx. 1693 people) and the Sunshine Coast Hinterland (approx. 1551 people). These numbers have likely been impacted by the Caloundra planning zones' unprecedented growth and large housing development. Although the Aboriginal and Torres Strait Islander population has increased, so has the overall population offsetting any density changes. The Caloundra and Sunshine Coast Hinterland planning zones both have the highest population density of all the planning regions and are also predicted to see the highest growth over the next 10 years.

The Gympie – Cooloola planning zone remains the most socio-economically disadvantaged, scoring in the bottom quintile of the Socio-Economic Indexes for Areas (SEIFA). This is also the most geographically isolated area with limited access to public transport. Pockets of socio-economically disadvantaged communities also exist within three other planning regions. Kings Beach (Caloundra planning zone), Nambour (Nambour planning zone) and Beerwah (Sunshine Coast Hinterland planning zone).





### 3 OUR PARTNERSHIPS AND COLLABORATION

Sunshine Coast Hospital and Health Service continues to collaborate with our Aboriginal and Torres Strait Islander Community Controlled Health Organisation (A&TSCCHO), North Coast Aboriginal Corporation for Community Health (NCACCH) and Country to Coast QLD (Primary Health Network (PHN)). Together we have collaborated on several community initiatives including Nyina Budja Health Equity Expo, Well Persons Health Check Day (WPHCD) and the Nyina Budja Health Equity Conference held in May 2024. The three organisations also meet bi-monthly at the Aboriginal and Torres Strait Islander Health Equity Forum which also includes a community Elder.

Sunshine Coast Hospital and Health Service has also established two Elders Advisory Committees (EAC). One on the Sunshine Coast (SCEAC) and the other in Gympie (GEAC). Both committees include Aboriginal and Torres Strait Islander Elders and have become a direct link to our community.



Aboriginal and Torres Strait Islander Health staff at the Aunty Betty Memorial Reconciliation Walk

#### Health Equity Expo & Conference

Sunshine Coast Health Service organised and hosted these events in collaboration with our partners.

#### Well Persons Health Check Day (WPHCD)

Sunshine Coast Health Service sponsors the event hosted by NCACCH. Several of our services also attend the day to provide information and conduct health checks.

#### Community Cultural Days and Celebrations

Sunshine Coast Health Service was part of the planning committee and attended the Aunty Betty Memorial Reconciliation Walk and the Community NAIDOC events in Gympie and the Sunshine Coast local government areas.

#### Deadly Start

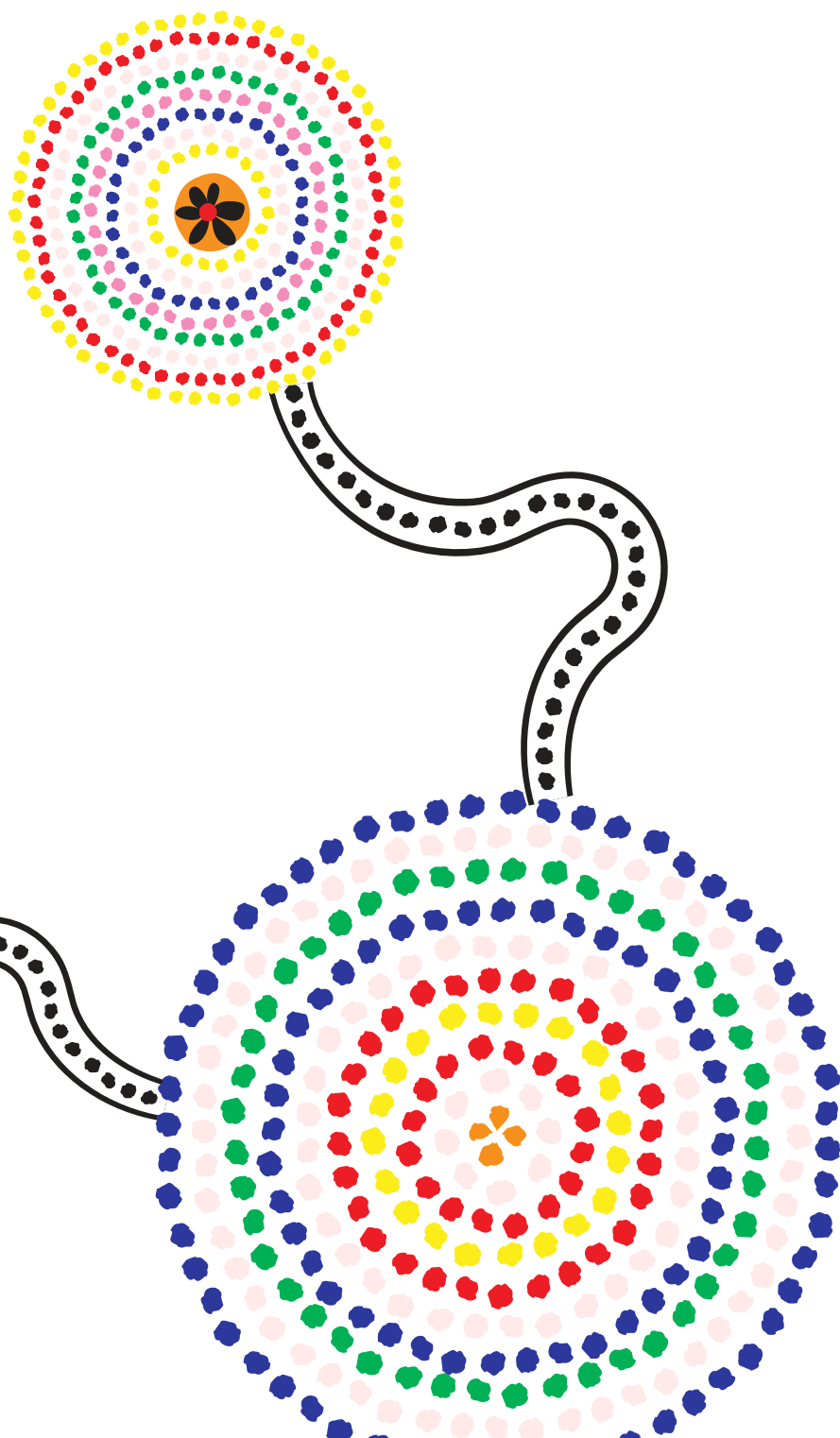
Sunshine Coast Health Service welcomed eight trainees as part of the latest cohort of the Deadly Start Education2Employment program coordinated by Metro North.

## 4 OUR ORGANISATIONAL STRUCTURE AND ACCOUNTABILITY

*A major aspect included throughout the Sunshine Coast Health Equity Strategy and Implementation Plan is the development of strong governance to support the rollout of actions across the organisation and to make Aboriginal and Torres Strait Islander Health everyone's business.*

To support this, Sunshine Coast Hospital and Health Service underwent some structural changes which included creating a Senior Director of Aboriginal and Torres Strait Islander Health position. This new position sits within the Executive team and reports directly to the Chief Executive. The position supports all aspects of strategy for Aboriginal and Torres Strait Islander people including cultural capability, health equity, workforce and clinical services.

Additionally, there are several Aboriginal and Torres Strait Islander Health services sitting within our mainstream directorates which also support closing the health gap and making Aboriginal and Torres Strait Islander health everybody's business. Directors from these services, along with the Senior Director of Aboriginal and Torres Strait Islander Health are all members of the Making Tracks Towards Health Equity (MTTHE) Committee. MTTHE is a governance committee in charge of reporting progress against the specific objectives and metrics outlined in the Sunshine Coast Health Equity Strategy and Implementation Plan and ensures strategic objectives and actions are aligned with state strategies and national standards. Below is an overview of those services working with the Aboriginal and Torres Strait Islander Health Directorate and those working within our mainstream areas.



## 4.1 Service Overview – within the Aboriginal and Torres Strait Islander Health Directorate

### Aboriginal and Torres Strait Islander Health Directorate Management and Project Team

The Management and Project team provides support to all areas within the Aboriginal and Torres Strait Islander Health Directorate and other services within the organisation. Day-to-day this includes writing and advising on strategy for Aboriginal and Torres Strait Islander people, supporting governance and accountability via reporting practices and ensuring co-design and co-development with community and partners. The team also successfully supports the delivery of health projects, service re-design and clinical services. A recent success for the team is organising and hosting the Nyina Budja (Live Strong) Health Equity Conference.

### Hospital Liaison Program

The Hospital Liaison Program is a cultural link between health professionals and our Aboriginal and Torres Strait Islander community. The Hospital Liaison Officers (HLO) support Aboriginal and Torres Strait Islander inpatients and family members and can be requested for any hospital visit. Day-to-day the HLOs visit all Aboriginal and Torres Strait Islander people staying in hospital wards and presenting to the Emergency Department to provide information on the hospital system, advocate for patients, provide emotional and cultural support and refer to other support services the patient may need during their stay or once discharged back into community.

### Preventative Health Pathways Program

The Preventative Health Pathways Program supports Aboriginal and Torres Strait Islander people with existing chronic health conditions who may be at risk of being admitted to hospital or have already been admitted to hospital for the condition. The program runs for up to 12 weeks and involves support from a multidisciplinary team which includes a Dietitian, Exercise Physiologist, Health Workers, Nurses, and a Social Worker. Day-to-day, the team meets with clients to share education and support behavioural changes to help manage their condition and health. The team works closely with North Coast Aboriginal Corporation for Community Health (NCACCH) and serves as a link between discharge from hospital and admittance to the primary care services. The team also supports several internal health clinics with other services and facilitates several community health outreach programs.

### Workforce and Education Program

The Workforce and Education Program contributes to building a culturally safe workforce by supporting the design and development of a wide range of initiatives. This includes supporting the delivery of the Aboriginal and Torres Strait Islander Cultural Practice Program (CPP), supporting career pathways, growth and retention of the Aboriginal and Torres Strait Islander workforce, and promoting and assisting with a range of culturally significant events within SCHHS and the wider community. Day-to-day the team will deliver CPP education sessions directly to staff, support Deadly Starts and other workforce initiatives.



Workforce and Education Team

## 4.2 Service Overview – within our mainstream services

### **Cultural Healing Team – Mental Health and Specialised Services**

The Cultural Healing team provides support to Aboriginal and Torres Strait Islander people and their family members who may be at risk or experiencing mental health illness. The team includes Health Workers and clinicians who work together to deliver a specialised consumer-focussed, accessible, responsive, and recovery-oriented mental health service. Day-to-day the team will meet with clients to provide assessment, treatment and mental health intervention. The team will advocate and support the client while providing care that respects the uniqueness of the Aboriginal and Torres Strait Islander community.

### **Birawan – Women’s and Children’s**

The Birawan team provide midwifery care to Aboriginal and Torres Strait Islander mothers and families which includes antenatal, birthing and post-natal care. Day-to-day the team support mothers with breastfeeding advice, birthing plans and provide health advice to ensure a healthy mum and bub.

### **Child Health and Jabba Jabba Team – Women’s and Children’s**

The Child Health and Jabba Jabba team provide a home visit vaccination and well bub service to children aged 0 to 15 years. Day-to-day the team will provide care directly in the clients home and along with vaccinations will also support healthy bubs by completing weight checks, hearing checks and support with other growth and development issues.

### **Nurse Navigator Program – Community and Preventive Health**

The Nurse Navigator provides holistic support to Aboriginal and Torres Strait Islander patients with complex co-morbidities that require an expert level of healthcare coordination. Day-to-day the Nurse Navigator will support a patient by working across the system to advocate on their behalf and to ensure they are provided with the care they need.

### **Footprints: Walking on Country – Community and Preventive Health**

The Footprints: Walking on Country program provides advice on diabetes management and basic foot care to Aboriginal and Torres Strait Islander clients. Day-to-day the team offer foot checks and advice on foot hygiene and education.

### **Respiratory – Medical Services**

The Respiratory team works with North Coast Aboriginal Corporation for Community Health (NCACCH) to offer lung health checks directly to the community during Well Persons Health Check Day.

### **Aboriginal and Torres Strait Islander Programs and Clinics**

The Aboriginal and Torres Strait Islander Health Directorate also supports several clinics alongside our mainstream services.

- BreastScreen Queensland: Sunshine Coast – Community and Preventive Health
- Diabetes Clinics – Medical Services
- Eye Health Clinics – QUT
- Sexual Health Clinics – Caloundra Health Service.



Child Health and Jabba Jabba Team

## 5 OUR ACHIEVEMENTS

*During this first year of the Sunshine Coast Aboriginal and Torres Strait Islander Health Equity Implementation Plan 2022 – 2025, the Sunshine Coast Hospital and Health Service was able to complete several actions and notable achievements.*

### Cultural Practice Program

The Aboriginal and Torres Strait Islander Cultural Practice Program is a mandatory education program for all staff. The program includes education around Aboriginal and Torres Strait Islander history and our Traditional Custodians the Kabi Kabi (Gubbi Gubbi) and Jinibara people. The team managed to exceed expectations by increasing rates by 4% within a year. Integrating cultural education into orientation has proven to be a significant advantage in increasing compliance and attendance rates.

### Artwork Installation

NAIDOC Week 2023 provided a wonderful opportunity for the service to unveil our local Aboriginal and Torres Strait Islander artwork which has been installed at each of our facilities. Each of the five artwork pieces are unique to the area and shows our connection to country and how it impacts our health.

### New Aboriginal and Torres Strait Islander Hospital Space

The Aboriginal and Torres Strait Islander Health team has recently just completed the refurbishment of a new space at Sunshine Coast University Hospital. The new space titled “Wunya” is located on the ground floor and can be easily accessed by the community. Wunya incorporates the team’s artwork and provides a culturally safe space for patients and families to meet with our staff while visiting the hospital.

### Deadly Start

Sunshine Coast Hospital and Health Service welcomed eight school-based trainees in 2023. The eight trainees are part of the Deadly Start Education2Employment program which is coordinated by Metro North. The school-based trainee program facilitated healthcare career pathways for high school students with a direct focus on Aboriginal and Torres Strait Islander patient care. The trainees work to complete their certifications in allied health assistance, assistant in nursing, dental assistance or food assistance.

**You said:**  
**Eliminate racism with shared storytelling and education.**

**You said:**  
**Increase culturally safe spaces and make it easier to find you.**



Aboriginal and Torres Strait Islander Health staff meeting at Wunya place

**You said:**  
**Provide more opportunities to get mob in jobs.**

## Workforce

As at the end May 2024, 2.02% of the SCHHS workforce identified as being Aboriginal or Torres Strait Islander putting us on track to meet KPIs within the Aboriginal and Torres Strait Islander Workforce Action Plan.

## Out of Hours Hospital Liaison Program

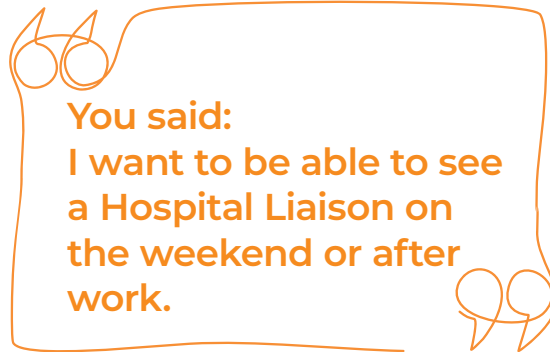
The Hospital Liaison Program was successful in securing funding to extend service hours to cover after hours (8am-10pm) and weekends (9.30am-6pm) at the Sunshine Coast University Hospital and Nambour General Hospital. The additional hours have allowed the team to connect with community members they may not have otherwise seen and offer them alternative care pathways.

## Expansion of the Preventative Health Pathways Program

The Preventative Health Pathways Program, formally known as the Preventable Hospitalisation Program, was successful in expanding the multidisciplinary team to include a Dietitian, Social Worker and additional Health Worker and Nursing positions. This expansion allowed the team to take a more comprehensive approach to care and provide clients with a wraparound service that supports their transition from hospital back into the primary care sector. The growth also allowed the team to take on Health Worker trainees to allow us to grow our own and support career opportunities.

## Elders Advisory Committee (EAC)

Sunshine Coast Hospital and Health Service has established two Elders Advisory Committees (EAC). One on the Sunshine Coast (SCEAC) and the other in Gympie (GEAC). Both committees include Aboriginal and Torres Strait Islander Elders and have become a direct linkage to our community.



## 5.1 Measures and Metrics

To better understand our current performance against the strategy and plan, we have implemented a traffic light system to show how well we are performing against each measure. In total, the HHS has 23 (green) performing or completed actions, 13 (yellow) performance flags and 8 (red) areas for improvement. All metrics reported are from Dec 23 – Jan 24 and demonstrate our performance over the 2023 calendar year.



### Performing:

Meeting the target or action outlined in the Implementation Plan.



### Performance Flag:



Improvement has been made but the target has not yet been achieved.





### Not Performing:

Minimum or no improvement has been made against the action or target.

### Objective: Eliminate Racism




Success	Strategies (Actions)	Measure / Metric	Target	Result
<b>Increased cultural competency through education and shared story telling:</b> Establish / grow cultural education for all staff.	<b>HHS</b> <ul style="list-style-type: none"> <li>Increase Cultural Practice Program (CCP) (mandatory training) compliance rates by establishing the training as part of the orientation process.</li> <li>Report CPP compliance rates per division at Operational Performance meetings.</li> <li>Offer additional education sessions to the workforce that encourage truth telling.</li> </ul>	<b>HHS</b> Cultural Practice Program Compliance Rates	> 70%	 Jan 2024 Snapshot: 74%  The HHS Aboriginal and Torres Strait Islander Cultural Practice Program managed to increase rates by 4% within a year. These rates are now being discussed at Operational Performance meetings and the team are also running additional in-service training on request.
	<b>PHN</b> <ul style="list-style-type: none"> <li>Provide Cultural Competency Training (CCT) to Primary Care providers.</li> </ul>	<b>PHN</b> Amount of CCT sessions held per year	4 sessions per year	 Training is scheduled for 13th & 20th April 24, 5th & 20th May 24.

## 5.1 Measures and Metrics


	<p><b>NCACCH</b></p> <ul style="list-style-type: none"> <li>Establish / grow cultural education for all staff.</li> </ul>			Ongoing
<p><b>Increased cultural competency through education and shared story telling:</b> Celebrate culturally significant dates and events</p>	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>Publish articles around significant dates in all staff communications to grow awareness.</li> <li>Hold events or education sessions on significant dates and invite all staff to participate.</li> <li>Attend and support community events that celebrate significant dates such as NAIDOC week celebrations</li> </ul>			 <p>The HHS Aboriginal and Torres Strait Islander Health team hosted NAIDOC celebrations at each hospital facility in 2023 (5 Events) and participated in various community events including NAIDOC Community Day, Reconciliation Week Aunty Betty Memorial Reconciliation Walk and Closing the Gap Day. Articles were published on significant cultural days in the HHS all staff newsletters and social media channels.</p>
	<p><b>HHS / PHN / NCACCH</b></p> <ul style="list-style-type: none"> <li>Celebrate culturally significant dates and events</li> </ul>	<p><b>HHS / PHN / NCACCH</b></p> <p>Develop a process to highlight culturally significant events and provide collaborative event planning with PHN and NCACCH</p>	<p>Agreed process / format to be completed by end of year 1 (2023)</p> <p>Process to be implemented by end of year 2 (2024)</p>	 <p>Agreed process / format for events is yet to be finalised.</p> <p>Throughout the year all parties were able to collaborate on event planning for several cultural and community events including Well Persons Health Check Day and the upcoming Nyina Budja Health Equity Conference.</p>



## 5.1 Measures and Metrics






<p><b>Increase culturally safe spaces</b></p>	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>• Encourage use of the SCHHS Cultural Audit Tool within the service.</li> <li>• Collate and report on the findings provided by the audit tool.</li> </ul>			 <p>The HHS Aboriginal and Torres Strait Islander Health team revamped the existing cultural audit tool and created an online version for ease of access and completion. Results and findings are being collated to inform future development opportunities.</p>
	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>• Complete a tender process for artwork designed by community and use this artwork for door wraps / signage and other material to provide a culturally safe space.</li> </ul>			 <p>All five (5) HHS Emergency Departments now have artwork from community displayed at the entrance. Nambour General Hospital's artwork launch will occur on completion of the refurbishment.</p>
	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>• Explore opportunities to develop culturally appropriate spaces for patients and family members while in hospital.</li> </ul>			 <p>With the above actions completed the HHS will review results of the cultural audit tool and continue to work with community to improve the environment within the hospital.</p>

## 5.1 Measures and Metrics



<p><b>Racist incidents are captured and addressed:</b> Integrate mechanisms to address racism and discrimination complaints.</p>	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>• Continue to work with Department of Health (DoH) to modify Riskman to include racism and discrimination reporting.</li> <li>• Develop a process for escalating and resolving complaints of racism and discrimination.</li> <li>• Develop a Human Resource (HR) policy on racism and discrimination to support managers in addressing complaints.</li> </ul>			 <p>Riskman now includes an option to report on discrimination.</p>
	<p><b>NCACCH</b></p> <ul style="list-style-type: none"> <li>• Integrate mechanisms to address racism and discrimination complaints.</li> </ul>			<p>Ongoing</p>

## 5.1 Measures and Metrics



### Objective: Increase Access

Success	Strategies (Actions)	Measure / Metric	Target	Result
<b>Clear and connected pathways for consumers:</b> Improve pathways into and out of hospital.	<b>HHS</b> <ul style="list-style-type: none"> <li>Report on waitlist numbers and keep community engaged on their health journey via alternative care options while waiting for specialist treatment.</li> <li>Establish priority access to specialist care for Aboriginal and Torres Strait Islander people.</li> </ul>	<b>HHS</b> Elective Surgery: Increased proportion of Aboriginal and Torres Strait Islander patients treated within clinically recommended time.	Cat 1 ≥ 98%  Cat 2 ≥ 95%  Cat 3 ≥ 95%	  Jan 2024 Snapshot: Cat 1: 80% Cat 2: 64.29%    Cat 3: 92.31%  The HHS is currently not performing against Cat 1 & Cat 2 but has seen improvement in Cat 3.
		<b>HHS</b> Specialist Outpatient: Increased proportion of Aboriginal and Torres Strait Islander patients seen within clinically recommended times.	Cat 1 ≥ 90%  Cat 2 ≥ 85%  Cat 3 ≥ 85%	  Jan 2024 Snapshot: Cat 1: 87.22%    Cat 2: 56.97% Cat 3: 71.98%  The HHS is currently not performing against Cat 2 & Cat 3 but has seen improvement in Cat 1.
	<b>HHS</b> <ul style="list-style-type: none"> <li>Increase referrals to transition / step down and community programs to better support patients on discharge.</li> </ul>	<b>HHS</b> Increased proportion of Aboriginal and Torres Strait Islander People receiving face-to-face community follow up within 1-7 days of discharge from an acute mental health inpatient unit.	75%	  23-24 FYTD Qtr2: 59%  The HHS is currently not performing against this measure.



## 5.1 Measures and Metrics

	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>Establish alternate care pathways for low acuity Emergency Department (ED) presentations.</li> <li>Grow community awareness to ED alternatives such as Minor Injury and Illness Clinic (MIIC).</li> </ul>			 <p>The HHS Aboriginal and Torres Strait Islander, Hospital Liaison program recently extended working hours to include after-hours and weekends to grow their presence within the Emergency Department (ED). This extended service allows our Hospital Liaisons to engage with our community directly and discuss alternative options to care where appropriate.</p> <p>The HHS Aboriginal and Torres Strait Islander, Preventative Health Pathways program supports ED alternatives by targeting community members who represent to ED for an unmanaged chronic condition. The team can help support, educate and link the patient into primary care alternatives.</p>
	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>Develop an integrated approach to service delivery across the primary, secondary and tertiary levels.</li> </ul>			 <p>Ongoing action that is still in planning phase.</p>


## 5.1 Measures and Metrics

<p><b>Clear and connected pathways for consumers:</b> Explore opportunities to provide alternative models of care.</p>	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>Rollout the Connected Community Pathways (CCP) projects to support alternative options to care.</li> </ul>		<p>To be completed by end of year 3 (2025)</p>	 <p>The HHS Aboriginal and Torres Strait Islander, Preventative Health Pathways program and the extended Hospital Liaison program are both successful Connected Community Pathways (CCP) initiatives that have been awarded recurrent funding. The HHS will continue to support other CCP initiatives that offer alternative models of care to our community.</p>
	<p><b>HHS / PHN / NCACCH</b></p> <ul style="list-style-type: none"> <li>Identify gaps and develop services in partnership (via agreements and shared funding submissions / resources) that have been developed in consultation with partners and community.</li> </ul>	<p><b>HHS / PHN / NCACCH</b></p> <p>Develop a process to enable a reference source for funding/ agreements.</p>		<p>To be completed by year 2 (2024)</p>  <p>Agreed process / reference source is yet to be finalised and is not due for completion until this year.</p>

## 5.1 Measures and Metrics




<b>Increased flexibility in access for consumers</b>	<b>HHS</b> <ul style="list-style-type: none"> <li>• Increase flexibility in access.</li> <li>• Increase outreach clinics to enable care closer to home.</li> <li>• Increase use of telehealth and telehealth hubs.</li> <li>• Develop an integrated approach to service delivery across the primary, secondary and tertiary levels.</li> </ul>	<b>HHS</b> <p>Reduction in the proportion of failure to attend appointments for Aboriginal and Torres Strait Islander paediatric community, mental health, and outpatient appointments.</p>	8%	 <p>23-24 FYTD Qtr2: 10%</p> <p>The HHS is currently not performing against this measure.</p>
		<b>HHS</b> <p>Develop disaggregated metric baseline to inform non-admitted patient telehealth usage rates for Aboriginal and Torres Strait Islander people.</p>		 <p>The HHS is developing a local Health Equity Dashboard to assist with capturing and sharing data. This data will also assist with developing future baselines.</p>
	<b>NCACCH</b> <ul style="list-style-type: none"> <li>• Increase flexibility in access.</li> <li>• Increase outreach clinics to enable care closer to home.</li> <li>• Increase use of telehealth and telehealth hubs.</li> <li>• Develop an integrated approach to service delivery across the primary, secondary and tertiary levels.</li> </ul>	<b>NCACCH</b> <p>Develop disaggregated metric baseline to inform non-admitted patient telehealth usage rates for Aboriginal and Torres Strait Islander people.</p>		Ongoing

## 5.1 Measures and Metrics

<b>Increased service awareness</b>	<b>HHS</b> <ul style="list-style-type: none"> <li>• Grow service awareness in the community and undertake regular consultation to understand barriers.</li> <li>• Attend and provide information on services at community events.</li> <li>• Grow service awareness with staff. Use all staff communication to raise service awareness.</li> <li>• Increase the capability of case coordination services to establish and share linkages.</li> </ul>	<b>HHS</b> Develop a collaborative annual calendar resource as a single reference point for community and work in partnership to support events..	To be completed by the end of Year 1 (2023)	 <p>The HHS recently established the Elders Advisory Committees (EAC) to help increase consultation with the community.</p> <p>The HHS regularly attend community meetings such as the Sunshine Coast First Nations Group (SC1NG) and a variety of community events to share information around services.</p> <p>A FY24/25 Calendar is to be developed.</p>
	<b>PHN</b> <ul style="list-style-type: none"> <li>• Grow service awareness in the community and undertake regular consultation to understand barriers.</li> <li>• Attend and provide information on services at community events.</li> </ul>			Ongoing
	<b>NCACCH</b> <ul style="list-style-type: none"> <li>• Grow service awareness in the community and undertake regular consultation to understand barriers.</li> <li>• Attend and provide information on services at community events.</li> </ul>			Ongoing




## 5.1 Measures and Metrics

### Objective: Culturally Diverse and Confident Workforce

Success	Strategies (Actions)	Measure / Metric	Target	Result
<p><b>Increased Aboriginal and Torres Strait Islander representation within the workforce</b></p>	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>• Increase Aboriginal and Torres Strait Islander representation through active recruitment.</li> <li>• Review recruitment strategies and role descriptions to ensure cultural appropriateness.</li> <li>• Promote employment pathways and opportunities via career expos, education, and community associations.</li> <li>• Modify existing positions to become Identified Positions.</li> <li>• Create a communication strategy to encourage the existing workforce to identify.</li> </ul>	<p><b>HHS</b></p> <p>Annual (year on year) increase in Aboriginal and Torres Strait Islander workforce representation.</p>	<p>Between 2.6% - 3.6% (must increase each year)</p>	 <p>Baseline: 1.79%</p> <p>Jan 2024 Snapshot: 1.84%</p> <p>With an overall increase of 0.5% this measure has been met.</p>  <p>The HHS has created culturally appropriate role descriptions and recruitment practices.</p>
<p><b>Established career pathways for growth and retention of the workforce</b></p>	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>• Establish and grow traineeships, student placements and graduate programs for all disciplines.</li> <li>• Develop mentorship programs to support growth.</li> <li>• Report on workforce by discipline to understand unrepresented areas.</li> <li>• Target workforce streams that are unrepresented by Aboriginal and Torres Strait Islander people.</li> <li>• Publish SCHHS Cultural Capability Implementation Plan</li> </ul>	<p><b>HHS</b></p> <p>Review, update and publish the SCHHS Aboriginal and Torres Strait Islander Workforce Strategy with measurable objectives.</p>	<p>To be completed by end of year 1 (2023)</p>	 <p>The HHS has published both the Aboriginal and Torres Strait Islander Workforce Action Plan 2023-2026 and the Cultural Capability Implementation Plan 2022-2024.</p> <p>The HHS has embedded the Deadly Starts traineeship program and is currently developing a mentorship program.</p>






## 5.1 Measures and Metrics



	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>Review and restructure existing SCHHS Aboriginal and Torres Strait Islander services / programs to include progression opportunities.</li> <li>Maintain Aboriginal and Torres Strait Islander representation at the Board and Executive levels.</li> </ul>			 <p>The HHS Aboriginal and Torres Strait Islander Health team has undergone a restructure to support progression opportunities.</p> <p>The HHS has maintained an Aboriginal and Torres Strait Islander representative at both the Board and Executive levels.</p>
<p><b>Clear and supported clinical governance for the new Health Worker Stream</b></p>	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>Recruit a senior professional lead position for the health Worker stream.</li> </ul>	<p><b>HHS</b></p> <p>Recruit a Senior Health Worker position</p>	To be completed by year 1 (2023)	 <p>The HHS has successfully onboarded a Senior Health Worker to support professional leadership for Health Workers.</p>
	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>Establish a professional support structure for Health Workers.</li> <li>Support professional development, upskilling and study opportunities via traineeships and Study and Research Assistance Scheme (SARAS).</li> </ul>	<p><b>HHS</b></p> <p>Improve rates of participation in the Working for Queensland (WfQ) Employee Opinion Survey</p>	100%	 <p>83% participation rate in 2023 staff survey. The HHS's first BPA staff survey.</p>
		<p><b>HHS</b></p> <p>Clinical governance support structure for Health Workers to be confirmed.</p>		To be completed by year 2 (2024)

## 5.1 Measures and Metrics


### Objective: Culturally Safe and Responsive Healthcare

Success	Strategies (Actions)	Measure / Metric	Target	Result
<b>Improve identification rates to ensure services provided are both clinically and culturally responsive</b>	<b>HHS</b> <ul style="list-style-type: none"> <li>Report on instances of 'not stated' per division at Operational Performance meetings.</li> <li>Deliver targeted education to areas that have high instances of 'not stated'.</li> <li>Implement an overarching communication strategy regarding the importance of identifying as Aboriginal and/or Torres Strait Islander for consumers.</li> </ul>	<b>HHS</b> Develop process and metrics to measure instances of 'Not Stated' on admission to the HHS (including waitlists and outpatient appointments) and work in partnership with NCACCH and PHN to improve GP identification rates	To be completed by year 1 (2023)	 <p>The HHS is developing a local Health Equity Dashboard to assist with capturing and sharing data. This data will also assist with developing future baselines.</p>
	<b>NCACCH / PHN</b> <ul style="list-style-type: none"> <li>Include identification on referral forms prior to admission to hospital.</li> </ul>			Ongoing
<b>Increase culturally safe care and revenue</b>	<b>HHS</b> <ul style="list-style-type: none"> <li>Increase revenue and leverage funding opportunities.</li> <li>Leverage existing Quality Incentive Payments (QIP) and Healthcare Purchasing opportunities that result in improved healthcare for Aboriginal and Torres Strait Islander consumers.</li> <li>Collaborate on funding applications for services that work across the care continuum.</li> </ul>	<b>HHS</b> Increased proportion of Aboriginal and Torres Strait Islander people completing Advance Care Planning (ACP)	≥ 2% increase from previous year  65%	 <p>Baseline: 5%</p> <p>23-24 FYTD Qtr2: 26%</p> <p>The HHS has met this measure.</p>  <p>Baseline: 60%</p> <p>23-24 FYTD Qtr2: 75%</p>


## 5.1 Measures and Metrics

		<b>HHS</b> <ul style="list-style-type: none"> <li>Attend antenatal visit during the first trimester.</li> </ul>	Between 80% - 84.8% (must increase each year)	 Baseline: 72%  23-24 FYTD Qtr2: 83.6%
		<b>HHS</b> Smoking after 20 weeks gestation.	Between 20% - 6.7% (must decrease each year)	 Baseline: 26%  23-24 FYTD Qtr2: 17%
	<b>NCACCH / PHN</b> <ul style="list-style-type: none"> <li>Collaborate on funding applications for services that work across the care continuum.</li> </ul>			Ongoing

## 5.1 Measures and Metrics




<p><b>Increased understanding of Aboriginal and Torres Strait Islander health issues and available services</b></p>	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>• Include Aboriginal and Torres Strait Islander programs and services in discharge planning.</li> <li>• Provide instruction and guidance to staff on how to apply cultural capability in everyday practice.</li> <li>• Implement a communication/ education strategy for clinicians regarding the importance of identifying and the specific health issues faced by the Aboriginal and Torres Strait Islander population.</li> <li>• Increase clinical education that focuses on cultural diversity such as simulations.</li> </ul>	<p><b>HHS</b> (Qualitative Measure) Increased proportion of Aboriginal and Torres Strait Islander people whose cultural and spiritual needs met during the delivery of healthcare using Patient Reported Experience Measures (PREMs).</p>		<p>No reporting is required until data quality has improved – as advised by DoH.</p>
<p><b>Making Aboriginal and Torres Strait Islander Health everyone's business</b></p>	<ul style="list-style-type: none"> <li>• Embed Health Equity Strategy and Objectives into Operational Plans.</li> <li>• Maintain Annual reporting and embed Health Equity Measures, Strategy and Objectives.</li> <li>• Continue to support the development of a state-wide database the reports on outcomes against the Health Equity Strategy.</li> </ul>	<p><b>HHS</b> The HHS will report on progress against the measures outlined in the Implementation Plan (2022–2025) every two months via the Making Tracks Towards Health Equity Committee (MTTEC).</p>		 <p>The HHS has embedded this reporting process.</p>

## 5.1 Measures and Metrics

	<ul style="list-style-type: none"><li>• Amend PAD and other appraisal documents to include questions around cultural integrity and competency.</li><li>• All meetings, committees and templates will include acknowledgement to country.</li></ul>	<b>HHS</b> Develop reporting process to ensure Health Equity implementation plan measures are tracked and reviewed.	To be completed by year 2 (2024)	 <p>The HHS is meeting this measure by including the strategy in planning documents, the publication of this evaluation document and the development of the local Health Equity Dashboard.</p>
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## 5.1 Measures and Metrics

### Objective: Co-Design and Partnerships


Success	Strategies (Actions)	Measure / Metric	Target	Result
<b>Greater transparency and accountability</b>	<b>HHS / PHN / NCACCH</b> <ul style="list-style-type: none"> <li>Develop a shared register outlining all existing agreements between the three organisations.</li> </ul>		To be completed by year 1 (2023)	 <p>This action still needs to be completed.</p>
<b>Improved consumer engagement</b>	<b>HHS</b> <ul style="list-style-type: none"> <li>Establish an Elders Advisory group.</li> <li>Maintain representation at community action and network groups.</li> </ul>	<b>HHS</b> <p>Support establishment of x 2 Elders Advisory Groups – (EAG) Gympie and Sunshine Coast</p>	To be completed by year 1 (2023)	 <p>The HHS has established two (2) separate Elders Advisory Committees (EAC) in Gympie and the Sunshine Coast.</p>
	<b>HHS / PHN / NCACCH</b> <ul style="list-style-type: none"> <li>Establish an ongoing community consultation strategy so information can flow between the three individual organisations and community.</li> <li>Develop a shared event calendar that outlines all significant dates and events for the year which can be accessed by community.</li> </ul> <b>HHS / PHN</b> <ul style="list-style-type: none"> <li>Continue to provide and share health needs assessments to inform service delivery.</li> </ul>	<b>HHS / PHN / NCACCH</b> <p>Develop a resource to provide partner core business and program information to provide clarity to community</p>	To be completed by year 2 (2024)	 <p>Agreed resource is yet to be finalised and is not due for completion until this year.</p>

## 5.1 Measures and Metrics

### Objective: Health Parity


Success	Strategies (Actions)	Measure / Metric	Target	Result
<b>Community is supported to stay healthy at all points in their health journey</b>	<b>HHS</b> <ul style="list-style-type: none"> <li>Work with Health and Wellbeing Queensland to identify preventive health education programs that could be offered in the community.</li> <li>Deliver education and support programs that increase health literacy.</li> <li>Deliver targeted education programs that address Potentially Preventable Hospitalisations, modifiable risk factors and other areas of health need as outlined in reporting.</li> <li>Develop programs for youth.</li> </ul>	<b>HHS</b> Decreased potentially avoidable deaths for Aboriginal and Torres Strait Islander people.  <b>HHS</b> Decreased rate and count of First Nations suicide deaths  <i>NB: The Sunshine Coast HHS may not report on this measure due to small numbers which may raise privacy, confidentiality and statistical reliability concerns. Exact counts will be suppressed in line with the health information disclosure guidelines developed by the National Health Information Standards and Statistics Committee (NHISSC)</i>	Sustain a reduction in potentially avoidable deaths and suicides.  <i>(There is no specific target outlined as there is no acceptable rate for potentially avoidable deaths and suicides.)</i>	 Reported three (3) yearly only.
		<b>HHS</b> Increased proportion of Aboriginal and Torres Strait Islander babies born with a healthy birthweight	$\geq 96.8\%$	 23-24 FYTD Qtr2: 96.75%  With an overall increase of 0.45% the HHS was only 0.05% short of achieving this target.

## 5.1 Measures and Metrics

	<p><b>PHN / NCACCH</b></p> <ul style="list-style-type: none"> <li>• Work with Health and Wellbeing Queensland to identify preventive health education programs that could be offered in the community.</li> <li>• Deliver education and support programs that increase health literacy.</li> <li>• Deliver targeted education programs that address Potentially Preventable Hospitalisations, modifiable risk factors and other areas of health need as outlined in reporting.</li> <li>• Develop programs for youth.</li> </ul>			Ongoing
<p><b>Holistic care is provided through the adoption of preventive health and improved lifestyle choices</b></p>	<p><b>HHS</b></p> <ul style="list-style-type: none"> <li>• Establish a Prehabilitation process prior to patients receiving care in hospital.</li> <li>• Deliver targeted education programs that address Potentially Preventable Hospitalisations, modifiable risk factors and other areas of health need as outlined in reporting.</li> <li>• Support Holistic Care through health checks.</li> </ul>	<p><b>HHS</b></p> <p>Increased proportion of Aboriginal and Torres Strait Islander Adult patients on the general care waitlist, waiting for less than the clinically recommended time.</p>	> 85%	 <p>100% All Aboriginal and Torres Strait Islander people on the general care waitlist have been seen within the clinically recommended times.</p>



## 5.1 Measures and Metrics

	<ul style="list-style-type: none"> <li>• Increase health checks and care planning including 715s and Mental Health checks.</li> <li>• Increase and report on Advance Care Planning (ACP).</li> </ul>	<b>HHS</b> Decrease Potentially Preventable Hospitalisations (PPH)	2% (Diabetes Complications)	 <p>Baseline: 2.6%</p> <p>23-24 FYTD Qtr2: 2.2%</p> <p>PPH related to diabetes complications has reduced.</p>
			7.1% (All other PPH Conditions)	 <p>Baseline: 7.6%</p> <p>23-24 FYTD Qtr2: 9.5%</p>
		<b>HHS</b> Meet targets set for Potentially Preventable Hospitalisations under the Making Tracks funding arrangement.		 <p>All targets related to Potentially Preventable Hospitalisations under the Making Tracks funding arrangement have been met.</p>

## 5.1 Measures and Metrics

	<p><b>HHS / HWQLD</b></p> <ul style="list-style-type: none"> <li>• Support the development of partnerships between health services and other agencies to help address actions related to social determinants.</li> <li>• Explore opportunities to work together and trial innovative projects that provide alternative pathways to intervention and preventative health.</li> </ul>	<p><b>HHS / HWQLD</b></p> <p>Investigate partnership/program opportunities with HWQLD</p>	<p>2% (Diabetes Complications)</p>	 <p>HWQLD does not provide programs in SCHHS region currently.</p>
	<p><b>HHS / PHN / NCACCH</b></p> <ul style="list-style-type: none"> <li>• Include wider social services in the Aboriginal and Torres Strait Islander Health Equity Forum to establish linkages.</li> <li>• Support Holistic Care by influencing social determinants</li> </ul>	<p><b>HHS / PHN / NCACCH</b></p> <ul style="list-style-type: none"> <li>• Develop collaborative engagement strategy with wider community and local social services — e.g., SC1NG Sunshine Coast First Nations Group</li> </ul>	<p>To be completed by year 2 (2024)</p>	 <p>Agreed communication strategy is yet to be finalised and is not due for completion until this year.</p>
	<p><b>PHN / NCACCH</b></p> <ul style="list-style-type: none"> <li>• Deliver targeted education programs that address Potentially Preventable Hospitalisations, modifiable risk factors and other areas of health need as outlined in reporting.</li> <li>• Support Holistic Care through health checks.</li> </ul>			<p>Ongoing</p>

## 5.1 Measures and Metrics

	<ul style="list-style-type: none"><li>• Increase health checks and care planning including, 715s and Mental Health checks.</li><li>• Deliver education to GPs around Aboriginal and Torres Strait Islander referral pathways and health checks.</li><li>• Explore and implement opportunistic screening with community health care teams.</li></ul>			
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## 6 NEXT STEPS

*The Sunshine Coast Aboriginal and Torres Strait Islander Health Equity Implementation Plan 2022 – 2025 was successful in a lot of aspects.*



Aboriginal and Torres Strait Islander Health team members

Robust consultation allowed the community to be heard and have direct involvement in service design. It also highlighted the importance of establishing ongoing consultation pathways with our community which directly lead to the formation of the Elders Advisory Committee (EAC). Although there is still progress to be made in closing the life expectancy gap, together we were successful in laying the foundation for longer term change and accountability.

Our next steps to promote change will include:

### **6.1 Nyina Budja (Live Strong) Health Equity Conference**

The Nyina Budja (Live Strong) Health Equity conference is a state-wide conference being held at the Sunshine Coast Health Institute on 30-31 May 2024 and will focus on all aspects of providing culturally safe healthcare to Aboriginal and Torres Strait Islander communities. The two-day event will explore all facets of culturally competent care with presentations under a wide range of themes and keynote speakers.

The themes include:

- Living a good life: From birth to our Elders
- Culturally competent care
- Workforce and leadership
- Belonging: Country, cultural, and social connectedness, social and emotional wellbeing
- Data and technology
- Hearing our voices: Co-design and community engagement.

### **6.2 Health Equity Health Check Van**

Geographic isolation, lack of public transport and large developments in new areas have all impacted how our community access services. The Health Equity Health Check Van will be refurbished with a patient chair, sink and other clinical equipment to provide an alternative way to access care. The van will be available to book by all services within Sunshine Coast Health and can go directly to the patient wherever they are.

### **6.3 Consultation: Health Equity Implementation Plan 2026-2029**

During the initial Health Equity consultation process, it was highlighted that a new implementation plan would be developed every three years to ensure we continue to meet our agreed strategies and targets. Our first step for the new plan will include consultation with community.

If you are interested in being contacted to provide feedback, please let us know by emailing [SCHHS-AandTSI-HealthEquity@health.qld.gov.au](mailto:SCHHS-AandTSI-HealthEquity@health.qld.gov.au).



Health Equity Health Check Van

[Sunshine Coast Aboriginal and Torres Strait Islander Health Equity Strategy \(2022 – 2031\)](#)

[Sunshine Coast Aboriginal and Torres Strait Islander Health Equity Implementation Plan \(2022 – 2025\)](#)

[Our Journey So Far](#)





**Sunshine Coast**  
Hospital and Health Service



**Queensland**  
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