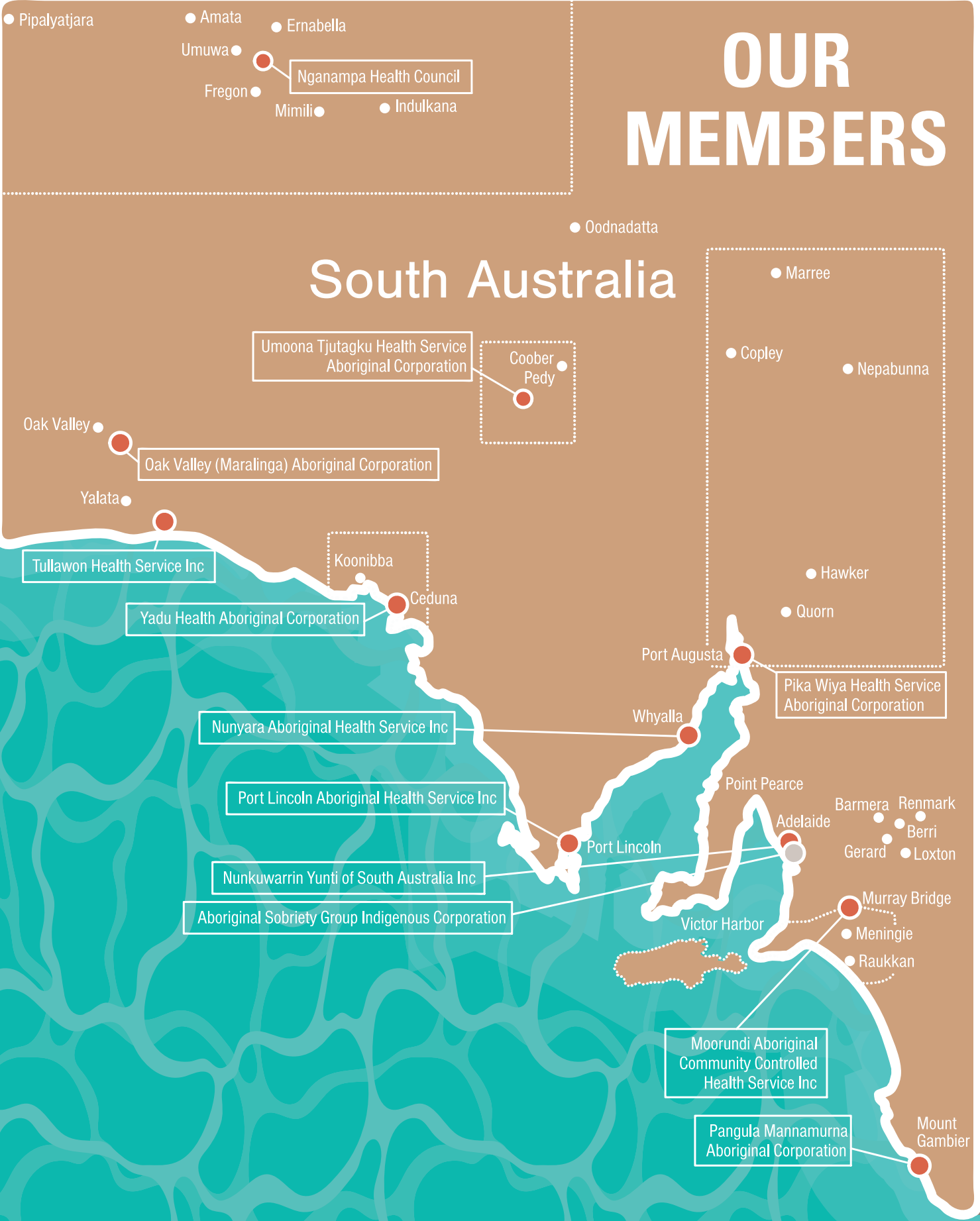


Annual Report 2023 - 2024



OUR MEMBERS

South Australia



Annual Report Contents

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Chairperson's Report 2023-2024

Welcome to our 2023-2024 Annual Report.



Wilhelmine Lieberwirth
Chairperson

I am pleased to share our Annual Report for the 2023-2024 Financial Year. Over the last twelve months Aboriginal Health Council of South Australia Limited (AHCSA) has experienced a number of changes in Leadership Staff and Board roles. Following the departure of AHCSA's former CEO, Mr Shane Mohor, in late 2023, a Caretaker CEO, Mr Patrick Moriarty, was appointed. I would like to thank Patrick for providing leadership during this time of transition for the organisation. I would also like to take this opportunity to acknowledge all previous Leadership Staff and Board Directors for their contribution to AHCSA.

Following a thorough and transparent recruitment process, AHCSA warmly welcomed our new CEO, Ms Tanya McGregor in March 2024. Tanya has been instrumental in leading and guiding the operational requirements of the organisation as well as introducing new key business systems, initiatives and reviews to improve AHCSA's functions, efficiencies and records management.

Through strong partnerships with Members and Funders, AHCSA has continued on with delivering longstanding health and educational programs and services as well as Member Support services. I wish to express my appreciation to our Members and Funders for their

support and for the important work that has been achieved together through these partnerships. Throughout the 2023-2024 year, AHCSA continued to successfully achieve our project and program outcomes, and advocate on behalf of our Members in many settings at both a state and national level.

On behalf of the Board of Directors, I would like to thank the AHCSA Staff for their hard work and commitment to our Member Services and Aboriginal Communities in South Australia. I would also like to acknowledge and thank our Member Services for the exceptional work they do in their own Communities in providing exceptional health care and improving the health of our people.

Lastly, I would like to acknowledge our Board of Directors who volunteer their time to govern and guide the organisation as we continue our work towards improved health outcomes and closing the gap for our Aboriginal communities.

Thank you for your interest in AHCSA's Annual Report and please reach out to the AHCSA Secretariat if you wish to discuss the content of this Annual Report or any of our programs and services further.

Chief Executive Officer's Report 2023-2024



Pat Moriarty
Caretaker Chief
Executive Officer

In November 2023, I was appointed as Caretaker CEO of the Aboriginal Health Council of South Australia Ltd (AHCSA). I would like to acknowledge that this was a challenging time for the Board, Managers, staff and Members and I thank them for their support during my Caretaker role. I would also like to acknowledge the support of NACCHO and Affiliates in sharing with me their knowledge and advice. Without the support of both State and Federal Ministers and Departments my task would have been extremely difficult.

I was chartered with instilling confidence and trust with key stakeholders, stabilising the organisation and the RTO, maintaining high standards of reporting and ensuring there was a transparent recruitment process for the full time CEO role.

The AHCSA Member CEOs in particular, provided frank and sound advice on steering the organisation through this transition and I could not have fulfilled the role without their support. AHCSA cannot function effectively if it is not

providing value to its Members and this was a priority for me and one we needed staff to share.

Together with the Management Team and staff we gathered input for the next Strategic Plan, worked on a values statement for AHCSA, reviewed and updated reporting processes. I look forward to seeing these continue to develop.

Lastly, the recruitment process for the new CEO with leadership from the Board and the recruitment sub-committee of Chairperson, Wilhelmine Lieberwirth, Treasurer, Joanne Badke, ex Deputy Chairperson Warren Miller and Executive Director of Nganampa Health Council John Singer, provided a number of high calibre candidates including our new CEO, Tanya McGregor. I am sure that in Tanya's hands and with the support of the Board and staff, AHCSA will continue to lead the Aboriginal Community Controlled Health Organisation (ACCHO) sector and provide valuable service to the Aboriginal Community of South Australia.

Chief Executive Officer's Report 2023-2024



Tanya McGregor
Chief Executive Officer

I am pleased to present this annual report as the newly appointed Chief Executive Officer of the Aboriginal Health Council of South Australia commencing in March 2024. I take the opportunity to thank Patrick Moriarty for his efforts as the interim CEO, providing organisational stability and assisting the Board during this transition.

Representing AHCSA and Members at the 2024 National Round Table on Aboriginal and Torres Strait Islander health during my first week was an opportunity to hear about some of the strategic directions for the sector.

Specifically, in areas such as Anti-Racism in the National Law for Registered Health Professionals and the National Health Reform Agreement between Commonwealth and State Governments. For the first time, this will enable service-level agreements and partnerships with Aboriginal Community Controlled Health Services.

The governance and constitution review has been a priority of the Board and Members over the past year. As the secretariat to the Board, I applied a project management focus to ensure transparency for Members and Board. The process of the constitutional review is to ensure the AHCSA constitution is contemporary to the desires of our Members and the community health needs.

Refreshing the risk management framework and various policies has been another key initiative of the Board. Completing this, together with our Board and Members, is a priority to ensure Board oversight.

Finally, I commenced a functional review of AHCSA that is in line with Constitution, Board and Member expectations. This review informs the organisational structure to deliver on the key role and functions as the peak body for Aboriginal health in SA. To ensure a clear and considered process the Board, Members and staff have been consulted and engaged in the development. The review is expected to be completed later in 2024 with recruitment to key leadership positions soon to follow.

In closing, I feel truly honored and privileged to work with the Board of Directors, Members and staff to maintain and build on the Aboriginal Community Controlled Health Sector strength and stability. I acknowledge the work of leaders whom have gone before me and I hope to build on the foundations of the past.

I look forward to working with the Board, Member CEOs and staff to over the coming years to consolidate the role of Aboriginal Community Control Health in South Australia and strongly advocate for better services for the Aboriginal Community in South Australia.

Board of Directors Annual Report

The Aboriginal Health Council of South Australia Ltd (AHCSA) has twelve Members represented on the Board of Directors chaired by an Independent Chairperson. The Board of Directors has oversight of the work of the Secretariat and monitors the Constitution. The Board have been reviewing the Constitution over the past two years to ensure it is contemporary to the needs of the Members whilst maintaining alignment to the Act (Corporations Act 2001). The Board and Secretariat in 2024 planned out a clear and transparent process that included a Constitutional Review Workshop with Members and process of feedback in preparation for approval at the 2024 Annual General Meeting (AGM).

The Finance Committee is the sole sub-Committee to AHCSA's Board and provides focused oversight on financial governance and strategic alignment at AHCSA. Over the last twelve months, the Finance Committee has mapped, catalogued all funding sources but has also conducted a thorough review to ensure that contracts are aligned with both the AHCSA Constitution and Strategic Plan. Working closely with the Finance and Procurement Manager, the Finance Committee has actively informed on strategies to enhance accounting practices, optimise program tracking, and improve financial reporting structures.

Since the recruitment of the new Finance and Procurement Manager, the Finance Committee has been diligently providing their advice and insights on reviewing organisational financial risks, gaining a clearer understanding of AHCSA's fiscal position, and moving forward with a positive and proactive approach. The Finance Committee's support has been instrumental in fostering a collaborative atmosphere, ensuring a more comprehensive assessment of financial strategies, and enhancing the organisation's readiness to address both current and future financial challenges. Through these combined efforts, the Finance Committee has strengthened AHCSA's financial resilience, aligning resources effectively to support organisational goals and deliver on its commitments.

Member Representation	Name and Board Position
Chairperson (Independent)	Wilhelmine Lieberwirth, appointed at AHCSA AGM 2023
Pangula Mannamurna Aboriginal Corporation	Sharon Ah Hang, Director
Port Lincoln Aboriginal Health Service Inc.	David Dudley, Director Secretary, Executive Board Director (from 30 November 2023)
Nganampa Health Council	Jamie Nyangu, Director
Tullawon Health Service Inc.	Joanne Badke, Treasurer, Executive Board Director
Yadu Health Aboriginal Corporation	Warren Miller, Deputy Chairperson, Executive Board Director (to 9 April 2024) Robert Larking, Director (from 15 May 2024)
Nunkuwarrin Yunti of South Australia Inc.	Tim Agius, Secretary, Executive Board Director (to 31 October 2023) Phoenix James, Director (from 13 June 2024)
Nunyarra Aboriginal Health Service Inc.	Robyn Joslyn, Director (from 14 August 2023 to 31 May 2024)
Oak Valley (Maralinga) Aboriginal Corporation	Vacant
Pika Wiya Health Service Aboriginal Corporation	Susan Dodd, Director
Umoona Tjutagku Health Service Aboriginal Corporation	Patrick Larkins, Executive Board Director
Moorundi Aboriginal Community Controlled Health Service Inc.	Derek Walker, Director (from 30 August 2023)
Aboriginal Sobriety Group Indigenous Corporation	Polly Sumner-Dodd, Director

Director	Eligible Board Executive Board Meetings	Board Executive Board Meetings Attended
Wilhelmine Lieberwirth	5	5
Sharen Ah Hang	3	3
David Dudley	3	3
Jamie Nyangu	3	2
Joanne Badke	5	5
Warren Miller	4	4
Robert Larking	0	0
Tim Agius	2	2
Phoenix James	0	0
Robyn Joslyn	3	1
Susan Dodd	3	1
Patrick Larkins	5	2
Derek Walker	2	1
Polly Sumner-Dodd	3	3





Constitutional Objective 1

Quality, Accreditation and Compliance

AHCSA has made significant strides in maintaining and enhancing our commitment to compliance over the past year. Our dedication to these critical areas ensures that we continue to deliver high standards of health services, meet regulatory requirements, and provide safe and effective care to our communities.

Re-Accreditation and Its Impact

AHCSA achieved accreditation for the next 3 years from 2023 under the Australian Service Excellence Standards (ASES). The ASES accreditation process is designed to help organisations like ours improve business practices and client services through a set of community service standards and a comprehensive support program. This achievement reflects our dedication to maintaining high standards in service delivery and organisational operations. Overall, achieving ASES accreditation for the next three years underscores our commitment to excellence and continuous improvement in all aspects of our operations. It positions AHCSA as a trusted and reliable service provider, dedicated to the well-being of the communities we serve.

Strategic Risk Management

AHCSA engaged BDO to enhance our strategic risk management framework. BDO reviewed our existing risk framework and risk management policy, then conducted a series of workshops with our Board, Member CEOs, and Executive team. This process has been instrumental in identifying, assessing, and managing risks that could impact our strategic plans. The work we have undertaken with BDO represents a cornerstone of our commitment to maintaining high standards of quality, accreditation, and compliance.

Policy and Procedure Review and Development

AHCSA has placed a strong emphasis on reviewing and developing our policies and procedures to ensure they align with best-practice standards. This comprehensive review aims to enhance our organisational practices, ensuring they remain current, effective, and in line with regulatory requirements, focused on developing new finance policies that bolster our financial management practices. These new policies are designed to ensure transparency, accountability, and sustainability in our operations. Through this effort, we are enhancing our governance framework and ensuring that our policies support our strategic objectives.

Human Resources

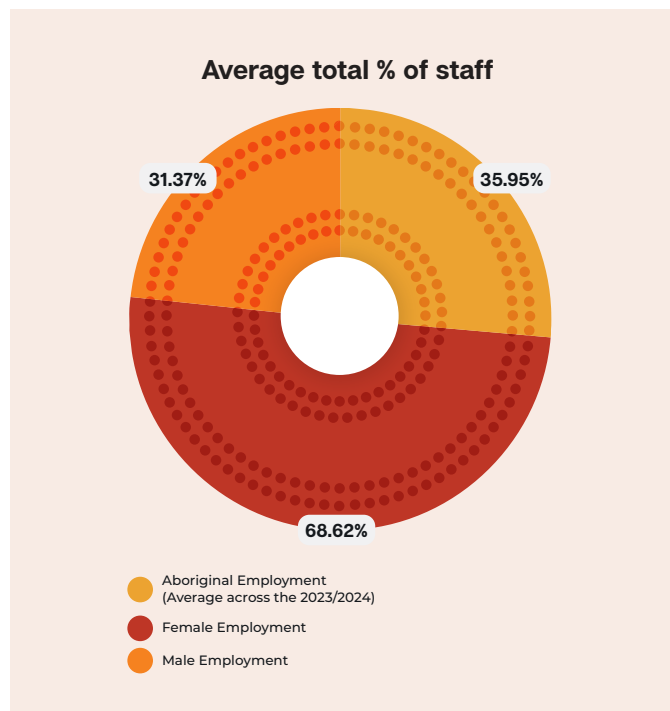
The Human Resources (HR) team at the Aboriginal Health Council of South Australia (AHCSA) provides essential support across all aspects of human resources, from daily operations to strategic HR matters. This includes professional advice and support to ensure efficient, responsive, and culturally appropriate HR services that meet AHCSA's unique requirements.

In the 2023/2024 financial year, AHCSA purchased the ELMO Human Resource Management (HRM) system. This system is designed to centralise and automate various HR functions, enhancing the efficiency and responsiveness of HR processes. Through ELMO, AHCSA can better manage its HR functions, creating a smoother experience for staff and strengthening our operational capabilities.

The 2023/2024 financial year marked a period of growth and transformation within AHCSA's HR function. With the introduction of the ELMO HRM system, we are better positioned to support our staff and uphold AHCSA's commitment to a positive, inclusive workplace culture. This advancement reflects AHCSA's dedication to operational excellence and to nurturing a workforce that is skilled, resilient, and aligned with our core values.

Staff Metrics

AHCSA is committed to maintaining a diverse and inclusive workforce that reflects the communities we serve. The following metrics outline our current workforce composition:



These metrics underscore AHCSA's commitment to diversity and inclusivity, aiming to create a balanced and culturally supportive workplace.



The ACAC Group met for a planning day to inform Aboriginal Cultural advice and Governance Structure to the New CEO.



Constitutional Objective 2

Public Health and Primary Health Care

The Programs teams at AHCSA supported member ACCHSs in taking a comprehensive approach to the health and wellbeing of their communities, and the services delivered in primary care.

In 2023-24, these programs included the following components:

- Ear Health
- Eye Health
- Environmental Health and Trachoma Elimination
- Social and Emotional Wellbeing
- Aged Care
- Sexual Health
- Tackling Indigenous Smoking
- Clinical Systems
- Patient Information Management and Health Informatics
- Health Policy and Advocacy
- Emergency Response and Pandemic Preparedness.

Public Health Medical Officers

The PHMOs work across the Programs teams and provide support to member services, including advocacy, public health guidance, clinical advice, research translation and education, and stakeholder engagement. The current PHMOs are Dr Jessica Leonard and Dr Razlyn Abdul Rahim (commenced February 2024).

The PHMOs have continued to provide Public Health guidance, including promoting up-to-date COVID-19 vaccination information and developing printed and digital resources to support uptake. Regular meetings with ACCHSs have included updates on communicable diseases, as well as a renewed focus on clinical topics in primary health care and chronic disease. Within AHCSA, activities included work on updating the STI and BBV handbook. In addition, regular reviews of SA Health's draft Clinical Prioritisation Criteria ensures appropriate prioritisation of community needs.

The PHMOs also provided advice on program development. Razlyn represented AHCSA for the

NACCHO Cancer Program Affiliate Information Session held in Canberra (28-29 May 2024). This workshop provided an overview of the Aboriginal and Torres Strait Islander Cancer Plan that underpins the ACCHO Sector Cancer Program, and opportunity to provide input and canvas the role of Cancer Liaison Officers (CLO) that are planned for roll out in July 2024. Based in each affiliate, the role will entail cancer sector engagement, representing the ACCHO sector in cancer care advocacy and policy planning at jurisdictional level, and supporting the ACCHO workforce in improving access to cancer care for impacted community members.

Activities in education and research included hosting a Public Health Medical Registrar, Dr Harmonie Wong. Harmonie worked with SA Health on a literature review regarding tuberculosis medication adherence. She also worked with the AHCSA Sexual Health team on developing video resources on how to utilise Communicare in patient consultations. AHCSA ran the annual GP CPD Forum for doctors working in Aboriginal primary health care. The PHMOs supported research activities through the ATLAS Indigenous Primary Care Surveillance network, and reviewed research manuscripts.

Stakeholder engagement has included representing AHCSA at the ASHM 'Towards Eliminating Congenital Syphilis in Australia' roundtable and collaborating with SA Health, including the Aboriginal Public Health team. The PHMOs have provided presentations on AHCSA's work for Preventive Health SA and for the SA Sexual Health Services Planning and Design (SHARP) working group convened by SA Health to redesign the sexual health care system in South Australia. AHCSA is a core member of the SHARP group and is represented by Razlyn in consultation with the Sexual Health team.

The PHMOs were involved in several groups and committees, including but not limited to:

- National Aboriginal and Torres Strait Islander Health Protection Subcommittee
- SA Oral Health Plan Monitoring Group
- SA STI and Blood Borne Virus Advisory Committee
- SA Syphilis Response Working Group
- Wellbeing SA Disease Prevention, Health Promotion and Population Health Committee
- NACCHO Core Services and Outcomes Framework – Evidence Based Primary Health Care Pathways Working Group
- SA Aboriginal Sexual Health and Blood Borne Viruses Partnership Response Implementation Group

Ear Health

The Ear Health Program is dedicated to raising awareness and providing education and support to AHCSA Member Services and communities. Otitis media, a major cause of ear disease in Aboriginal children, can lead to severe ear pain, headaches, and hearing difficulties. Effective management can significantly improve children's health and their educational, social, developmental and employment outcomes. The Program aims to assist Aboriginal Community Controlled Health Services (ACCHSs) in South Australia in maintaining best practices and offers training and upskilling in ear and hearing health for staff members.

Program activities have included:

- **Support Audiologist from the HAP-EE program:** Facilitate attendance at school screenings.
- **Partnership with Flinders University:** Research project to evaluate the effectiveness of Oto-Acoustic Emissions (OAE) testing in diagnosing and treating otitis media in Aboriginal children aged 0-6 years.
- **Support for AHCSA RTO:** Provide ear health training and education for students undertaking Certificate III and Certificate IV in Aboriginal Primary Health Care.
- **Provision of the Menzies National Guide:** Distributed to all ACCHSs, along with the ear and hearing health app for phone devices.
- **Established networks with Hearing Australia:** Collaboration for outreach screening services and partnerships with ACCHSs.
- **Supply of clinical ear health models and posters:** Provided to ACCHSs to aid in education and awareness.
- **In-service training for healthcare professionals:** Conducted to refresh ear health skills.
- **Participation in the National Aboriginal and Torres Strait Islander Ear and Hearing Health Expert Reference Group:** Contribute to the national strategy for ear and hearing health.

These activities are designed to improve the management of otitis media and overall ear health in Aboriginal children, thereby enhancing their quality of life and future opportunities.



Eye Health

The AHCSA Eye Program strives to address the key challenges that prevent all Australians from having healthy eyes and good vision, noting that vision is very important for our holistic health and daily function.

Collectively, Aboriginal adult Australians are still enduring higher rates of vision loss than other Australians, and most of it is preventable or treatable. Therefore it is important that people have regular reviews. The most common eye conditions are refractive error (correctable with glasses), cataracts, and diabetic retinopathy.

This program involves provision of on-ground supports at the local ACCHO interface, fostering an Aboriginal eye health workforce, stakeholder engagements at national/state/regional levels, and evidence-based advocacy for system reforms to remove access barriers, strengthen patient pathways, and lower the turnaround times to tertiary care. These stakeholder engagement and advocacy roles are facilitated by the South Australian Aboriginal Eye Health Working Group (SAAEHWG).

Program Support to ACCHOs

The Eye Program through the Eye Health Project Officer (EHPO) provides ongoing supports to AHCSA's Member Services (Aboriginal Community-Controlled Health Services), including:

- Enhancing primary health workforce skills & knowledge – through tailored onsite staff training/mentoring, in testing, workflow, documentation and MBS billing.
- Clinical systems support – including systematic use of Patient Information Systems and retinal camera connectivity
- Procuring of equipment and consumables
- Local eye health coordination and facilitation/co-facilitation of support to visiting providers with mentoring of ACCHO workforce.

Optometry Services and Glasses

Visiting optometrist coverage, while generally sufficient, needs extra support for uptake at some sites. Dedicated local eye health coordinators and promotion of visiting services are successful in facilitating these clinics. The *GlassesSA* statewide glasses subsidy scheme currently supports free glasses for Aboriginal people receiving a full Centrelink benefit. Through the SAAEHWG and other advocacy chains, the Department for Human

Services have recently announced the intention to expand eligibility. The Eye Program is also working closely with *GlassesSA* to ensure that applications from remote areas are not incorrectly rejected for technical reasons.

Cataracts

Cataracts are associated with ageing and diabetes, and when advanced can severely impair vision and increase risk of accidents. Although they are efficiently managed by day surgery, public wait lists can be 4-6 years and self-funding of surgery is largely unaffordable. In 2016 the Commonwealth introduced the Eye & Ear Surgical Support (EESS) Scheme - a specific funding stream to facilitate eye & ear surgeries for First Nations people in rural & remote locations. The EESS did not by any means cover the entire surgical demand, but it certainly made a dent by providing a continuum of service from diagnosis to treatment for a portion of patients who would otherwise miss out. Alas, for the last two years the EESS funding allotment for SA was halved. The Rural Doctors Workforce Agency (RDWA) as the jurisdictional conduit agency for this funding have advocated strongly for a full restoration, and SAAEHWG has formulated further advocacy.

Diabetic Retinopathy

Unmanaged diabetes increases the likelihood of several eye conditions, including cataracts and glaucoma, but the most common one is **diabetic retinopathy (DR)**, sometimes coupled with **diabetic macular oedema (DMO)**. DR is the leading cause of preventable vision loss in working age Aboriginal adults.

A little over half of Aboriginal adults with diabetes are actually having their recommended yearly eye review, to avoid unnecessary blindness from DR.

AHCSA's Member Services each have a retinal camera, enabling trained PHC staff to perform retinal photography and screen for DR. This supports prevention, and early referral and intervention to avoid irreversible damage.

Far West ACCHO-Led Model Of Care

AHCSA's Member service Yadu Health in Ceduna is centric to the Far West hub-and-spoke model of care for a range of community-based eye health treatments & surgeries. It is a multi-partnered approach with the ACCHO at its core, to provide culturally safe ophthalmologist consults and quite a range of diagnostics and treatments that would otherwise be

referred externally and involve patients travelling vast distances for every component. With cataract surgery for instance, it brings all the steps to the regional hub, allows continuity of care from a well-liked and trusted provider, significantly reduces surgery wait times by about 80%, and just creates a safer and more positive patient experience, which takes place on Country.

This system is made possible by the combined efforts of an upskilled Yadu Aboriginal Health Practitioner (AHP) for local eye health coordination, a very proactive visiting ophthalmologist, an ophthalmic nurse practitioner, AHCSA's EHPO, and a strong array of eye health equipment for performing a range of diagnostics including biometry markups for cataract surgery. It also relies on partnerships with the local optometrist practice, the Ceduna hospital, RDWA, and Alcon.



Recent Achievements

- Yadu AHP Bobby-Ray Milne achieved national recognition as winner of this year's NATSIEHC24 Award in the category of Outstanding Leadership
- DHS announced modifications to the *GlassesSA* subsidy scheme to facilitate free prescription glasses to all Aboriginal applicants regardless of Centrelink status
- Collaborated with NACCHO to develop a comprehensive series of eye health online learning modules to foster specialisation of Aboriginal Health Workers/Practitioners (AHWs/AHPs) into eye & vision care focussed roles.

Trachoma - Environmental Health

Health Promotion and Education to School Students and Staff

As part of the Trachoma Elimination Program, health promotion and education activities were carried out to continue to raise awareness and promote the 'clean faces' messages. These activities are essential for implementing a comprehensive personal hygiene program to combat trachoma, as outlined in the 'Guidelines for the Public Health Management of Trachoma in Australia'.

The activities were delivered to students and staff at Willsden Primary and Augusta Park schools in Port Augusta, as well as at two other community engagement activities; Closing the Gap Day held at the Adelaide Showgrounds and The Tarpari Wellbeing Day in Port Pirie. The health promotion and education activities involved the presence of Milpa the Goanna, the mascot for healthy eyes and good health, who assists in engaging the students and creating a more interactive learning experience. The ongoing partnering with the EH workers at Pika Wiya and FUNLHN made for a successful collaboration delivering fun and memorable sessions with students.



The Trachoma Team at the Tarpari Wellbeing Day - Jacinda from FUNLHN, Nash from Pika Wiya HS & Kate from AHCSA



Health Promotion at Augusta Park Primary School



NT Health nurse Imogen Couchman checking for any signs of trachoma

Social and Emotional Wellbeing

AHCSA's Social & Emotional Wellbeing (SEWB) Project Officer was filled for the full 2023-24 financial year. This was possible via one-off funding from BHP until October 2023, and then a short term NACCHO Mental Health & Wellbeing Support Grant up until 30 June 2024. The Project Officer provided extensive training to ACCHS sector staff, and also provided post-referendum support.

The Project continued to deliver Livingworks "SafeTALK" suicide intervention workshops, thus creating suicide safer communities across SA Aboriginal communities & regions.

SafeTALK is a half day suicide alertness workshop that prepares anyone over the age of 15, regardless of prior experience or training, to become a suicide-alert helper.

Participants leave SafeTALK with practical knowledge of how to identify someone at risk of suicide and support them to 'KeepSafe'. In the June 2022 – June 2024 timeframe, Snowy delivered 24 SafeTALK workshops with AHCSA, Member affiliates or other Aboriginal SA Health services, training 300 people in SA to be suicide alert. In the 2023 - 24 financial year, 6 workshops were delivered, reaching 64 participants.

ACCHO's + Participants during this financial year included:

- PLAHS, Pt Lincoln
- Umoona Aboriginal Health, Coober Pedy
- Tarpari Aboriginal Health, Port Pirie
- Riverland ADAC, Berri
- AHCSA RTO SEWB Students.
- AHCSA Staff & SA stakeholders.

The written & verbal feedback was overwhelmingly positive with 95% of participants feeling more prepared to talk directly & openly to a person with thoughts of suicide following the course.

- Rating of the Training out of 10, 1 (very bad) to 10 (very good)
 - 56% gave it a 10/10 rating;
 - 21% gave it a 9/10 rating;
 - 19% gave it an 8/10 rating.
- "How prepared do you now feel to be able to talk directly & openly to a person about their thoughts of suicide?"

40% of participants felt **Well prepared** and 46% felt **Mostly prepared**. Combined this equates to 86% feeling either well prepared or mostly prepared.

A selection of Comments from participants included:

"I'm so glad I did SafeTALK. I'm now more aware of how to help people who may be going through suicidal ideation."

"I've learnt a lot. Workshop was informative, safe & inclusive."

"This was logical & easy to follow + understand."

"Great involvement between facilitator & students; It was a safe place to talk openly."

In October 2023, at the annual Indigenous Wellbeing Conference (IWC) in Darwin, Snowy Day & Trevor Wingard successfully presented the previous year's findings to around 150 conference delegates. Titled "The impact of Livingworks SafeTALK Suicide Intervention workshops in the SA Aboriginal community."



Homecare Workforce Support

The Home Care Workforce Support Program (HCWSP) is a national program funded by the Australian Government and NACCHO to help grow the home care workforce with positions such as personal care workers and allied health workers. AHCSA has received funding that focuses on training, recruitment and retention of home care workers.

We have engaged with Aboriginal participants living in remote and very remote areas to provide a range of job ready initiatives including:

- Access to training such as first aid and child safe environments
- Training on My Aged Care covering topics such as
 - Understanding the aged care system
 - Ensuring quality care
 - Culturally responsive palliative care
 - Building an Elders Inclusive Community
 - Advocating with our Elders
 - Navigating difficult conversations
- Information on career pathways and further training options, including accredited training
- Police Clearances and employment checks
- Obtaining Identification
- Providing support with resumes and mentoring

Having a skilled home care workforce with local Aboriginal people as carers for their community, will help Elders stay independent and live at home for longer.



Resources to attract and support existing aged care workforce can be found here- Introduction to Aged Care – Videos and facilitator guides | Australian Government Department of Health and Aged Care

Event

HCWSP coordinator Emma Tahuri attended the inaugural **Remote Workforce Aged Care Accord – Remote Workforce Summit** in Adelaide in November 2023. Delegates from various remote and very remote areas across Australia attended the conference. The event covered workforce challenges and strategies to address these, services and supports for people working in remote communities, and presentations from providers in remote locations.

Guest speakers included; The Aged Care Quality and Safety Commissioner, Purple House, Dementia Australia, Star of the Sea Elders Village – Thursday Island, Dept of Health and Aged Care.

Interim First Nations Commissioner

AHCSA met with Andrea Kelly – the Interim First Nations Aged Care Commissioner as part of her National community consultations. Commissioner Kelly commenced her role in January 2024 and her appointment is a first step in addressing *Recommendation 49 of the Royal Commission into Aged Care Quality and Safety, Progress Report: Implementation of the Recommendations of the Royal Commission into Aged Care Quality and Safety | Australian Government Department of Health and Aged Care* which recommended a statutory First Nations Aged Care Commissioner to ensure culturally safe, tailored and flexible aged care services for First Nations people.

Elder Care Support Program

The Elder Care Support program is designed to deliver Aboriginal and Torres Strait Islander Aged Care support, connection and coordination.

The program aims to:

- Support and empower Aboriginal and Torres Strait Islander elders/families to understand and navigate the aged care system.
- Reduce barriers across the aged care journey to increase the number of Aboriginal and Torres Strait Islander people accessing aged care services, achieving or exceeding parity with non-Indigenous people at a whole of system and program level.
- Increase the number of Aboriginal and Torres Strait Islander people receiving care on Country.
- Increase clinical and non-clinical employment and career opportunities for Aboriginal and Torres Strait Islander people in aged care.
- Increase workforce capability and capacity in community controlled aged care support and empower the community – controlled sector to coordinate place-based care needs.

Since the commencement of the program in 2023, AHCSA has employed two positions, Home Care Workforce Support Coordinator and the Elder Care Workforce Training Coordinator. The Elder Care Program has established:

- Supporting workforce navigating My Aged Care online portal
- Delivered the Elder Care Train the Trainer to our Member Services workforce
- Attended the NACCHO National Elder Care Yarning Circle
- Facilitate the Elder Care Community of Practice meetings, monthly meetings

AHCSA is looking forward to hosting our first State Yarning Circle for the year in September 2024, this is in collaboration with South Australian West Coast ACCHO Network (SAWCAN).

We will continue to build our ACCHO workforce sector in the Elder Care Support program and strengthen our external stakeholder relationships to ensure we are delivering a culturally safe and inclusive workforce to ensure the best services are provided for our Aboriginal and Torres Strait Islander elders.



AHCSA's Elder Care Support program.

Sexual Health and Blood Borne Virus Program

The AHCSA Sexual Health and Blood Borne Virus (BBV) Program is dedicated to improving the sexual health and wellbeing of South Australian Aboriginal people and communities. Our team focuses on engaging the community and building clinical capacity to address sexually transmitted infections (STIs) and BBVs through our close work in Aboriginal Community Controlled Health Services and key government and non-government partners to develop and implement effective health initiatives.

The team has continued its work supporting various research projects including the First Nations Molecular Point-of-Care Testing Program, and the ATLAS Indigenous primary care surveillance network.

The team is committed to fostering a supportive environment that promotes regular testing, informed discussions and the reduction of stigma and discrimination. Our goal is to ensure that everyone in the community has access to the information and resources they need to maintain their sexual health and wellbeing.

Enhanced STI and BBV Screening

From 4 September to 13 October 2023, the Sexual Health and BBV team supported the Annual Enhanced Six-Week STI and BBV screening in SA ACCHS. During the enhanced screening period, ACCHS staff actively encourage sexually active young people aged 16-35 to participate in “STI check-ups”. The program aims to reduce the transmission and increase treatment for common STIs such as chlamydia, gonorrhoea and trichomonas, alongside testing for syphilis, HIV and hepatitis serology. Community engagement grants, funded in collaboration with SHINE SA and Country SA PHN, were provided to services to promote participation and awareness among young Aboriginal people across the state. The AHCSA Sexual Health Team delivered clinical support and community education to multiple services during the enhanced screening period.

“No Shame in Getting Tested” Campaign

In a collaborative effort with SHINE SA, and funded by Country SA PHN, the “No Shame in Getting Tested” campaign was launched. This campaign aimed to raise awareness of HIV and STI transmission and prevention among Aboriginal young people in regional and remote communities. It also sought to encourage open discussions about testing and treatment of STIs to combat stigma. Health promotion resources, including educational materials for Aboriginal health care workers, were developed and distributed to all SA ACCHS and over 30 other health services, NGOs, and schools throughout SA. The campaign’s impact was showcased through a poster presentation at the Australasian Sexual and Reproductive Health Conference in September 2023.

2023 ATLAS Workshop

Some highlights from the 2023 ATLAS workshop included further development of the new ATLAS dashboard version 2.0 to identify ways to further enhance CQI, data translation, benchmarking and research opportunities for ACCHS. South Australian member services Yadu Health and Nunkuwarrin Yunti presented data using the ATLAS network. Yadu shared insights from a recent collaboration between Yadu Health, Walkabout Barber and Kirby Institute (supported by AHCSA Sexual Health Team) to enhance STI and BBV testing in young Aboriginal people. Nunkuwarrin Yunti presented ‘Enhancing STI + BBV Control Through Collaboration’ showcasing a collaborative project between ATLAS and Nunkuwarrin Yunti.

Continued Efforts and Future Directions

The AHCSA Sexual Health and BBV Team remains committed to keeping conversations about STIs and BBVs going in community, and making sure that everyone knows how these infections are spread, what risks are involved and, importantly, how to prevent them. We will continue to strengthen community engagement and respond to emerging sexual health issues. Thank you to all ACCHS staff, community members and partners who have contributed to and supported our work.



Tackling Indigenous Smoking (TIS Program)

The Tackling Indigenous Smoking ('TIS') Program is managed and funded by the Australian Government Department of Health and Aged Care's Preventive Health and Communicable Disease Section (First Nations Health). AHCSA is among 26 Regional Tobacco Control Grants recipients Australia-wide.

Throughout 2023-2024, the TIS program has undergone a process of revitalisation, after the program's previous long-term contract concluded on 30 June 2023. AHCSA's TIS Team, called the Puyu Blasters, were pleased to receive a further four-year contract commencing 1 July 2023, offering new regional boundaries and exciting opportunities for growth and partnerships. The current region covers Port Augusta, Port Pirie, Whyalla, Leigh Creek/Marree/Flinders Ranges region, Upper Mid-North region, Coober Pedy and Oodnadatta, as well as the APY Lands, which are serviced by AHCSA's partner TIS Team based at Nganampa Health Council.

The current TIS Program is funded until 30 June 2027, focusing on priority groups in regional and remote Aboriginal communities. AHCSA's TIS Team consists of three TIS Coordinators, Tim Lawrence, Trevor Wingard and Jordan West, who operate collaboratively to design and deliver cohesive and sustainable programs supporting smoking and vaping cessation across the region. The TIS program retains focus on flexible delivery to ACCHOs and non-member health services, including mainstream, with targeted education packages on tobacco smoking and vaping, and the specific concerns this presents to Aboriginal communities. The TIS Team enjoys opportunities collaborating with various Aboriginal services, facilitating diverse programs and enhancing the effectiveness of the work. AHCSA's TIS Team have developed a wide range of presentations specifically designed for individual target groups.

Continuing Puyu Blasters programs include schools and youth, community organisations and services, health

worker yarning circles, yarning circles, environmental scans (smoke free homes/cars/workplaces, and including the review or implementation of new workplace policies), women's and maternal yarning circles, and follow-up programs for those who are visited frequently. Importantly, the team is in the process of developing all new youth presentations, including dividing the previous presentation into more age-appropriate programs following an increased demand for vaping and tobacco education for middle-school and primary age students.

An exciting update from the TIS Team is the upcoming establishment of a new brand identity, developed in collaboration with Pat Caruso from We Create Print Deliver. Pat is a proud First Nations Graphic Designer and Artist of Eastern Arrernte background. New resources and team merchandise, as well as a reinvigorated event stall presentation and updated online presence, are also in the works.

Presentation of the TIS Teams story at the March 2024 Regional TIS Workshop in Fremantle, they were honoured to be invited to submit an abstract for presentation, and even more thrilled when it was accepted. The team is looking forward to showcasing the success of the TIS program with a diverse multinational audience.

The Puyu Blasters are always looking for new contacts and opportunities to develop relationships within this important space. Building partnerships and collaborations in the region is fundamental to support the uptake of TIS programs, and to extend the reach of TIS messaging into communities. The TIS Team is incredibly proud of their longstanding partnerships and enjoy meeting with new people to discuss opportunities for further cooperation. If you would like to have a yarn about the TIS program, or you are interested in having the team visit, please get in touch on (08) 8273 7200.



Culture Care Connect

This national program is an initiative of NACCHO and the Commonwealth Government, with support from State and Territory Governments. NACCHO and its affiliates have a primary focus on prevention activities and services in each state and territory, with the aim of improving wellbeing outcomes and reducing rates of attempted suicide.

In consultation with ACCHOs and other stakeholders, the community controlled sector will develop and deliver Jurisdictional Suicide Prevention Plans to strengthen mental health and suicide prevention initiatives across the regions.

This will include establishment and ongoing implementation of Community Controlled Suicide Prevention Networks (CCSPNs); provision of Aboriginal Mental Health First Aid Training (ATSIMHFAT) for workforce and delivery of Aftercare Services by ACCHOs, in partnership with existing regional mental health services. This provides a strong and clear pathway between community-controlled, mainstream services and acute care settings for Aboriginal clients at risk of or recovering from a suicide attempt, their families, and Communities. The integration of suicide prevention planning and Aftercare Services enables Aboriginal and Torres Strait Islander-led coordinated approach to reduce

the prevalence of self-harm, suicide ideation and suicide in a way that meets the needs and priorities identified by Communities.

To support member services, AHCSA will actively advocate for systems and policy change at jurisdictional level were identified through CCSPN; and mapping/planning activities, including identification of relevant legislation, policies, programs, and future funding opportunities.

In this reporting period the following activities for Culture Care Connect has occurred:

- Successfully recruited 1 staff member to the ATSIMHFA Trainer position in June 2024, with part of this role to support member services with CCSPN's at a local level;
- Successfully secured funding through Preventative Health SA for Member Services including SAWCAN and Moorundi to support community-based discussions around cultural ways to support wellbeing;
- CCC Jurisdictional Coordinator (AHCSA) participated in National Indigenous Suicide Prevention Forum and Workshops – Melbourne, March 2024;



Alcohol and Other Drugs

- Continuing ATSIMHFA Training in 2024 to support Community Controlled Suicide Prevention Networks and member service staff to provide best practice suicide prevention and wellbeing support for local communities and regions;
- CCC Jurisdictional Coordinator (AHCSA) attended NACCHO Conference in Perth WA, October 2023 and delivered CCC presentation as part of panel for National Suicide Prevention and Mental Health Program;
- ATSIMHFA Trainer attended Aboriginal Child and Adolescent Social and Emotional Wellbeing Governance Group as AHCSA representative, ongoing;
- CCC Coordinator and ATSIMHFA Trainer continue to attend Communities of Practice meetings for Jurisdictional Coordinator, Regional Network Coordinator and ATSIMHFA training.
- Delivered Responding to Loss, Grief and Trauma and Respond to Critical Situations as part of Diploma of Narrative Therapy, Nunkuwarrin Yunti RTO;
- ATSIMHFA Trainer attended Cultural and Industry Engagement Meeting - Diploma of Narrative Approaches for Aboriginal People as part of cultural review for update of training modules.

Following on from work undertaken during 2023, AHCSA has continued to provide workforce development opportunities through provision of RTO electives and other non-accredited training focussed on Alcohol and other Drugs (AOD).

The AOD Project Officer conducted a needs analysis for the AOD workforce and sector. This informed a scoping exercise of national resources to complement training and strengthen existing knowledge and skills of the AOD workforce.

AHCSA RTO has discussed collaborative partnership with other RTOs to maximise reach across the Aboriginal AOD and Health Workforce. The AHCSA RTO plans to offer the Certificate IV in Alcohol and Other Drugs or a similar qualification.

AHCSA has continued contributing to national conversation to strengthen Aboriginal and Torres Strait Islander Alcohol and Other Drugs Treatment for inpatient and outpatient services, harm reduction and brief interventions. This is driven by the National Indigenous Australians Agency (NIAA).

Disaster Risk Reduction

In early 2023 AHCSA was awarded a small amount of funding to undertake a project in scoping the needs of Aboriginal communities across South Australia in relation to disaster risk. AHCSA engaged external consultants who spent time talking with many Aboriginal organisations across the state including ACCHO services on key areas of disaster risk, climate risk and community/ service preparedness. The findings from this scoping activity informed the funding application that was submitted by AHCSA in July 2023.



AHCSA was awarded monies through SAFECOM (South Australian Fire and Emergency Services Commission) for 12 months (until December 2024) to undertake a project specifically with ACCHOs focussing on emergency response planning.

The main aim of the project is to strengthen the capability of the South Australian ACCHO sector, by supporting and guiding the development of local health service disaster emergency response plans that include regional elements of climate risk. This is linked to health and wellbeing of communities, also focussing on impacts of ACCHO business continuity and service delivery during times of disaster and emergencies. This includes response to future pandemics.

The main activities of the last 6 months have been to work with ACCHOs to undertake research and analysis on the existing state of health service disaster response and resilience plans. Through this work, it is identified that a high percentage of ACCHOs are signed up and in progress or completed the Emergency Response Planning Tool (ERPT) in alignment with service accreditation. The tool was developed by Health Point and approved by RACGP. ACCHO licences have been financially supported by Country SAPHN.

Through face to face supports, the focus has been to review and further develop the ERPT plans and explore the extent of connectivity between the ERPT and any climate risk plans for local regions.

AHCSA continues to work with services to identify and evaluate service priorities, including capacity-building needs to inform projects such as training programs, workshops, and educational materials.

A key element of the project is to foster and support connections between local ACCHOs and disaster and emergency management sectors.

AHCSA has participated in various forums and roundtables to strengthen state-wide and local partnerships.

A steering group has been established and coordinated by AHCSA, with members including representation from ACCHOs, SACOSS, SAFECOM, SA Health, Red Cross and representatives from the emergency management sector.

Continuity of Care Protocols (CCP) Maternal and Child Health

Child and Maternal Continuity of Care Project

The Child and Maternal Continuity of Care Project (CCP) contribute to the Co-design of the implementation strategy for the Continuity of Care Protocols Program at a whole-of-system level including Aboriginal Community Controlled Services (AHCCO's) to improve the quality of life of Aboriginal children 0 to 4 and mothers of Aboriginal babies, by improving the performance of the health system; with a focus on continuity of care.

Since the commencement of the CCP Project in July 2023, AHCSA has achieved providing a Community Controlled collated view, through participation and contributing to the Testing & Co-Design Phase for the Child and Maternal Continuity of Care Protocols Program ('CCP Program'). AHCSA has been the Lead for the Testing Working Groups, in particular Accountability and Responsibility, Connected Landscape and CCP Workforce.

AHCSA will continue to participate on the CCP Program and Co-Design throughout the next CCP Phase and will be the Community Controlled Lead on all Testing Working Groups including Accountability and Responsibility, Connected Landscape, CCP Workforce, Whole of Systems, Implementation Plan, Measures & Information and Continuity of Care Protocols.

AHCSA is happy to be leading and supporting measures towards improving health care systems that are culturally and clinically safe in their delivery of services for Aboriginal families.





Constitutional Objective 3

Research

Aboriginal Health Research Ethics Committee

Objectives of the Program

The Aboriginal Health Research Ethics Committee (AHREC) is dedicated to promoting, supporting, and monitoring high-quality research that benefits Aboriginal people in South Australia. Our primary objectives are:

1. **Promote and Support Quality Research:** We actively encourage and facilitate research initiatives that have a positive impact on the health and well-being of Aboriginal communities in South Australia.
2. **Monitor Research Initiatives:** Our committee diligently oversee ongoing research projects to ensure they adhere to ethical standards and meet the needs and expectations of the communities involved.
3. **Provide Ethical Guidance:** We offer comprehensive advice to communities on the ethical considerations, benefits, and cultural appropriateness of proposed research initiatives.

By adhering to these objectives, AHREC ensures that all research conducted is not only ethical but also culturally sensitive and beneficial to the Aboriginal communities we serve.

Program Activities

AHREC champions the interests of Aboriginal communities in South Australia, ensuring adherence to the NHMRC Guidelines and the South Australian Aboriginal Health Research Accord. AHREC emphasizes community priorities in research, meticulously reviewing proposals to uphold values such as spirit and integrity, cultural continuity, equity, reciprocity, respect, and responsibility. Through this rigorous process, AHREC guarantees that research is conducted ethically, respects cultural practices, and provides tangible benefits to Aboriginal communities.

All research submitted to AHREC must prioritize the needs and well-being of South Australian Aboriginal communities. This involves a partnership approach with relevant Aboriginal organisations and a feasible knowledge translation strategy. Research must follow good practices, presenting rigorous methodologies for quantitative representativeness and qualitative data saturation to effectively address research questions.

Key responsibilities of the AHREC Secretariat include:

- **Pre-submission Consultation:** Advising on ethical reviews before submission deadlines.
- **Coordinating Submissions:** Managing correspondence and submission timelines.
- **Convening Meetings:** Organizing AHREC meetings and implementing decisions.
- **Rebuttal Activities:** Addressing feedback from researchers as needed.

Additional duties encompass:

- Advising the AHCSA CEO on research partnership requests.
- Representing AHCSA at various forums, including:
 - Health Translation Board of Directors
 - Aboriginal Communities and Families Research Alliance (ACRA)
 - National Indigenous Research Capacity Building Network
 - SA Health HREC
- Ongoing monitoring and reporting of research activities.
- Managing and recruiting AHREC new members.
- Promoting AHREC's initiatives.

Key Issues Frequently Addressed in Applications

- **Aboriginal Governance and Ownership:** Ensuring Aboriginal control and perspective throughout the research.
- **Consent:** Securing fully informed and freely given consent or addressing waivers.
- **Cultural and Linguistic Considerations:** Meeting the cultural and linguistic needs of participants.
- **Confidentiality and Privacy:** Protecting participant privacy and data confidentiality.
- **Data Management and Sovereignty:** Proper data handling and respecting data sovereignty.
- **Study Tools:** Ensuring clarity, cultural safety, and appropriateness of study tools.
- **Participant Information and Consent Forms:** Providing clear and comprehensive information.
- **Methodology and Feasibility:** Aligning study methodologies with goals and managing project scope.
- **Recruitment:** Developing effective and culturally appropriate recruitment strategies.
- **Additional Protocols and Tools:** Establishing distress protocols, robust data analysis, appropriate promotional materials, and effective data collection instruments.

New Proposals Submitted to AHREC in 2023-24

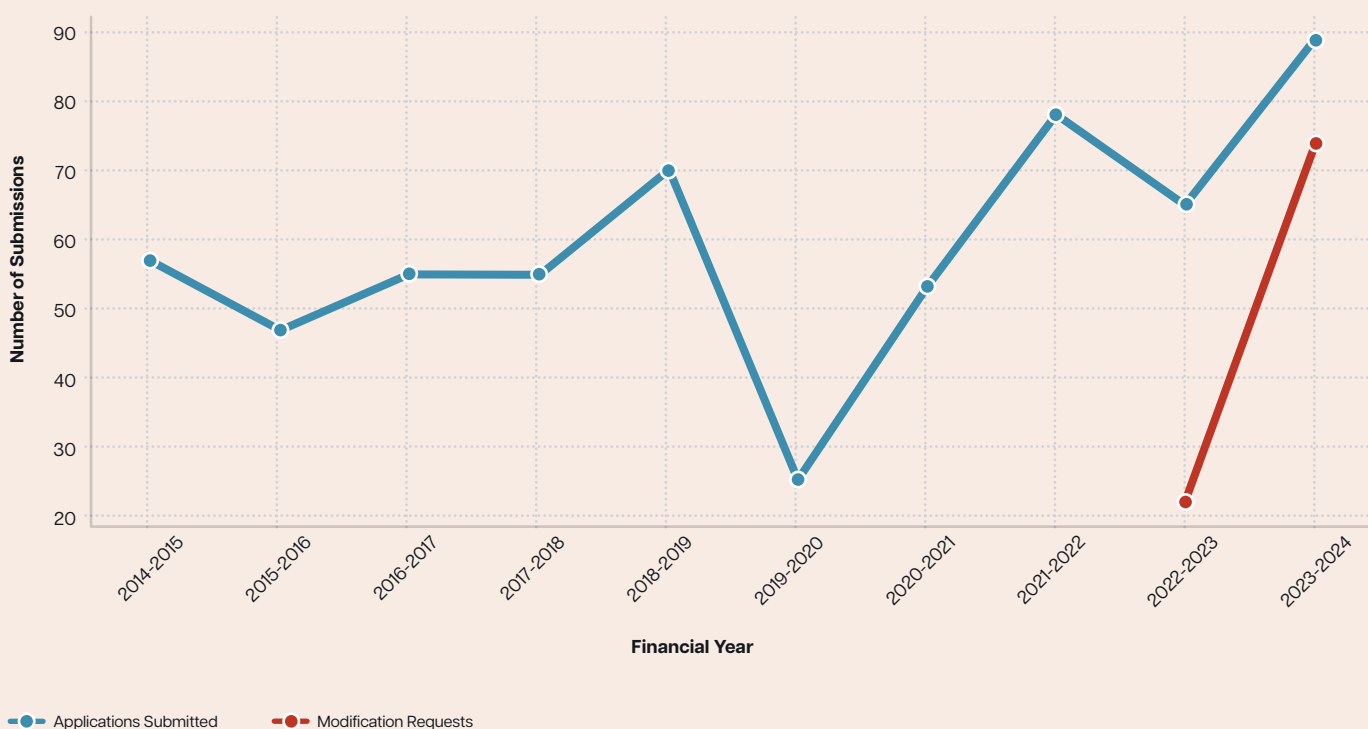
During the 2023-24 period, AHREC received a variety of new research proposals aimed at improving the health and well-being of Aboriginal communities. Key proposals included:

- Closing the Kidney Gap
- Co-designed Perinatal and Early Years Care
- Hepatitis B and Hepatitis C Studies
- Aboriginal Ageing Well Roadmap
- Reducing Risk of Diabetes and Cardiovascular Complications in Pregnancy.
- Child Protection Services in Health
- Informed Racism Reduction
- Drug and Alcohol Misuse
- Palliative Care

Applications submitted in Financial Year 2023-24

The number of applications submitted for AHREC review reached 89 in 2023-2024, marking a significant increase of 27.14% compared to the previous year. In 2023-2024, 78 modification requests were submitted for review. Due to changes in the procedures of other committees and the SA Health Ethics Committee, research applications are now reviewed only after modifications have first been submitted to AHREC.

Number of Applications Submitted to AHREC for Ethical Review (2014-2024)



Quality Systems Member Support

Patient Information Systems

Communicare V22.4

ACCHOs were supported with upgrading to Communicare version 22.4 which complies with the mandatory reporting changes to the Australian Immunisation Register (AIR) from 1 March 2024.

Under the Australian Immunisation Register Act 2015 it is mandatory for all vaccination providers to report the administration of COVID-19, influenza, NIP and Japanese encephalitis virus (JEV) vaccines to the AIR.

Legislative changes mean that from 1 March 2024, it will be mandatory for all vaccination providers to report to the AIR:

- the route of administration for JEV vaccines
- information about the vaccine type for all vaccines prescribed by the Australian Immunisation Register Rule 2015 (this includes COVID-19, influenza, NIP and JEV vaccines).

Under the 'vaccine type' field, vaccination providers can choose one of the following options:

- antenatal
- NIP/Commonwealth
- private
- state program.

Other supports provided

Member services received ongoing support in the Patient Information Management System (Communicare) with the aim of improving data capture and analysis to improve health outcomes. Key areas of support included:

- General Communicare training was provided onsite and via MS teams depending on the situation
- Liaising with Communicare Helpdesk to fast-track issues within member service systems
- Developed several clinical items to enable data entry for new procedures, new projects and funding avenues.



Health Informatics

Power BI

The Aboriginal Health Council of South Australia (AHCSA) has recently embarked on an initiative to improve its data analysis and reporting for Medicare and population health metrics by implementing Power BI. This advanced analytics and visualisation tool enables AHCSA to streamline the collection, analysis, and reporting of key data, specifically tailored for its member services. The primary objective is to facilitate a more data-driven understanding of healthcare trends and demographics, ultimately enhancing AHCSA's ability to meet the unique health needs of Aboriginal communities.

Since the project's launch, AHCSA has successfully completed several member service projects, showcasing Power BI's capability in delivering in-depth Medicare and population health insights. Through this platform, member services are now better equipped to track and analyse key healthcare indicators, visualise population health trends, and identify areas where service improvements are needed. Power BI's interactive dashboards and real-time reporting have proven invaluable for decision-makers, offering a clear, accessible view of complex data that supports informed strategies in healthcare delivery and resource allocation.

These early successes in implementing Medicare and population analysis demonstrate AHCSA's commitment to innovation, establishing a strong foundation for future development. As more member services benefit from these insights, AHCSA is also looking to develop additional dashboards using the feedback we receive from member services to really focus in few other key areas.

Health Policy and Grants

Over the past year, the Health Policy and Grants Coordinator has worked closely with ACCHOs in South Australia, providing support for health policy and population health grants. This role is designed to enhance the focus on health policy and grants, ensuring that member ACCHOs are well-informed about policy changes and funding opportunities. It also offers a platform for ACCHOs to influence policies that improve outcomes for Aboriginal and Torres Strait Islander people.

Key responsibilities include:

- Monitoring health policy developments at both State and Commonwealth levels and keeping member ACCHOs informed about changes in relevant program guidelines.
- Collaborating with AHCSA staff, members, and other stakeholders to guide Aboriginal health policy.
- Coordinating responses from members to Royal Commissions and Parliamentary Inquiries.
- Tracking grant opportunities and assisting members with grant applications. Sharing a number of distinct grant opportunities from various government and philanthropic sources and providing information on ongoing grants available to ACCHOs.

This work included:

- Contributing to the review and consultation of the ITC and Mental Health arrangements with PHNs
- Role as a member in developing the People at Risk in Emergencies Framework
- Role as a member in developing Aboriginal and Torres Strait Islander Remote Food Security Strategy
- Providing review and feedback on a number of SA Health Clinical Prioritisation Criteria documents
- Providing input into the National Health and Climate Strategy
- Providing a formal submission to SA Parliament supporting a Human Rights Act for SA
- Supporting AHCSA and members with grant applications in men's health, remote jobs, disaster resilience and funding for workforce supports.

Additionally, AHCSA partnered with ACCHOs to include case studies from their health services for use in grant submissions and Business cases.





Constitutional Objective 4

Chronic Disease

Rheumatic Heart Disease (RHD) Strategy

Overview

In 2023 AHCSA received funding from SA Health to co-design a strategy to eliminate Rheumatic Heart Disease.

This project, guided by a Strategy Coordinator and Steering Committee, aims to develop a Rheumatic Heart Disease Strategy and Implementation Plan for South Australia which can deliver health equity across the spectrum of care. A strong, integrated, whole-of-system response to prevention, early detection, diagnosis, treatment and management of Acute Rheumatic Fever (ARF) and Rheumatic Heart Disease (RHD) will contribute to elimination.

ARF and RHD are entirely preventable. Inequities in the social determinants of health, including environmental factors, housing and hygiene infrastructure, contribute to the disproportionate burden of RHD in First Nations people. Elimination is possible with targeted improvements within systems, the built environment,

primary health care, health promotion, training and education and tertiary health care.

Within the Strategy we have identified five main priority areas to ensure the success of the Elimination of Rheumatic Heart Disease.

- Aboriginal Leadership
- Community Based Programs
- Healthy Environments and Primordial Prevention
- Early Prevention
- Effective Care and Support

We have had a great response from our Member Services across South Australia and give a special thanks to them for their willingness to add valuable insight into the Rheumatic Heart Disease Strategy and their openness and willingness to share their knowledge. There are many things to look forward to within the Rheumatic Heart Disease space at AHCSA and we are extremely excited to be leading the way with the Rheumatic Heart Disease Strategy.





Constitutional Objective 5

Education and Training

Registered Training Organisation (RTO)

The RTO provides accredited and non-accredited training and development opportunities to the Aboriginal health sector, with a key priority of training of Aboriginal Health Workers and Aboriginal Health Practitioners. The vision of the RTO is to provide training and professional development in a community space that is welcoming and reflects and centres Aboriginal culture.

Staff within the RTO:

- James Bisset – RTO Manager
- Shaun Jacobson – AHP Clinical Educator
- Alfie Gollan – AHP Clinical Educator
- Illira Wanganeen – AHP Clinical Educator
- Jarrad Benbolt-Agius – Jurisdictional Traineeship Coordinator
- Christine Bowden – Senior Clinical Educator
- Holli Nicholas – Accreditation and Compliance Coordinator
- Kiara Blackwell – RTO Admin Officer
- Caitlin Brogan – RTO Admin Officer
- Lisa Catt – Nursing/Midwifery Educator
- Patricia Lawson – AMIC Project Coordinator
- Tennelle Richards – Child and Maternal Continuity of Care Senior Project Officer

The RTO has made significant strides in advancing the education and training of Aboriginal Health Workers and Practitioners through its Registered Training Organisation (RTO). In October 2023, following establishment of the First Nations Health Workers Traineeship Program (FNHWTP) and Australian Skills Quality Authority (ASQA) extension to teach out period for Certificate III and IV in Aboriginal and/or Torres Strait Islander Primary Health Care, the RTO successfully commenced two new classes with 24 trainees enrolled. In addition, 14 trainees from prior student cohorts have completed qualifications in the past 6 months, a reflection of our RTOs commitment to providing culturally responsive training in a supportive community space.

Our ever-growing Expression of Interest list highlights the strong demand across all health sectors for training in Aboriginal Health Workers (AHWs), Aboriginal Health Practitioners (AHPs), and the specialised AMIC (Aboriginal and/or Torres Strait Islander Maternal and Infant Care) field, which is currently undergoing redevelopment. This specialisation for Aboriginal Health Practitioners (AHPs) builds on the model of care introduced into Whyalla and Port Augusta in 2004 through the Anangu Bibi Regional Birthing Program and the Aboriginal Regional Family Birthing Program. Aboriginal Maternal Infant Care (AMIC) practitioners are critical to delivering antenatal and postnatal care to Aboriginal women and their families in South Australia.

On 7th March, the First Nations Health Worker Traineeship Program (FNHWT) was officially launched at AHCSA. We were excited to welcome students of AHCSA's first cohort of the First Nations Health Worker Traineeship in Australia. The event was attended by the Assistant Minister for Indigenous Health, Federal Senator Malarndirri McCarthy. The traineeship program, launched on behalf of the National Aboriginal Community Controlled Health Organisation (NACCHO), aims to support up to 500 First Nations people in their studies to become either an Aboriginal Health Worker or an Aboriginal Health Practitioner by 2027.

The RTO has had a successful recruitment period. Jarrad Benbolt-Agius, a Kurna, Narungga and Kokatha man, has been appointed as Jurisdictional Traineeship Coordinator, overseeing the Traineeship Program funded affiliate employment positions. We have also welcomed back Illira Wanganeen, a proud Narungga, Kurna and Ngarrindjeri woman, who completed Cert IV Practice and AMIC in 2020, into the role of Clinical Educator.

RTO Educator Profile

Shaun Jacobson

"My name is **Shaun Jacobson**, I am a proud Ngarrindjeri man but call Kurna country home. My current role is Clinical educator within the RTO team.

My AHCSA journey began in 2022 where I backfilled for a project officer position that led me to studying and completing a Certificate 4 in Training and Assessment which eventually led me to move into an educator role. I have the pleasure of assisting in the delivery of the Certificate 3 and 4 in Aboriginal & Torres Strait Islander Primary Health Care qualifications.

I have been an Aboriginal Health Practitioner with 14 years and gain much clinical experience over that time which allows me to be able to teach and share not only my clinical experience but my lived experiences as well to the next upcoming Aboriginal Health Workers and to be Practitioners from a complex real-life perspective.

The RTO are currently transitioning into the new Certificate 3 and 4 qualifications that have superseded the old qualifications so it is a very busy and exciting time for myself and the rest of the RTO team as well begin to plan develop safe and appropriate contextualized resources for the qualifications that are of a high standard and cultural safe for our future students.

The RTO are also extremely excited to be upgrading our simulation and medical equipment in our Simulated Learning Environment (SLE) in a staged approach. This means that current and future students will have access to and be taught with new equipment to simulate what student would be utilizing within their health services that meet best practice approaches."

Illira Wanganeen

"My name is **Illira Wanganeen**, I'm a Proud Narungga, Ngarrindjeri and Kurna woman. Registered AMIC and Aboriginal Health Practitioner who started with AHCSA in May 2024 as an RTO Educator. I am enrolled into the TAE course provided by NACCHO, that will enable me to educate and assess students studying to be Aboriginal Health Practitioner's. Currently, I am getting exposure in the RTO whilst working as part of the Aboriginal Health Practitioner's team that are leading the Cert 3 and Cert 4 classes, while maintaining cultural safety and gender balance. My goal is to complete my TAE course by February 2025 and independently train and assess students."

Alfie Gollan Jr

"I am **Alfie Gollan** Jnr and I am Ngarrindjeri and Kokatha Man who lives on Ngarrindjeri Ruwe (land) in Murray Bridge. I am one of the Clinical Educators and Aboriginal Health Practitioners here in the RTO. Some of the highlights throughout the year has been learning the stories from every student and how important they are in providing holistic and culturally safe primary healthcare services in their communities. I love when we get the chance to go see our student's in their communities and their health services. To see how proud each student is to show off their many skills and the amazing work they do in their communities is one of the most rewarding parts of what we do in the RTO. We also get to see firsthand how important the work of Aboriginal Health Workers and Aboriginal Health Practitioners is to improving access to culturally safe healthcare for our people.

Throughout the year students learn clinical skills as well as skills and knowledge around all aspects of Aboriginal and Torres Strait Islander health including:

- Social Determinants of Health
- How Population Health is addressed on all levels (Local, Rural, Regional, Remotely, State, National and International)
- Social and Emotional Well-being (SEWB)
- Advocating and Communication Skills
- Knowledge around Work Health and Safety, Infection Control and how to work legally and ethically
- Knowledge of Chronic Disease and Nutrition
- Knowledge around Alcohol and Other Drugs
- Knowledge around Sexual Health.

Some of the favourite moments throughout the year have been:

- Student Excursions (Moorundi ACCHS/Royal Adelaide Hospital visits)
- Student Cook-off (during Chronic Disease and Nutrition Workshop)
- Students completing their Certificates.

Our Educators continue student and supervisor support sessions through on-country site visits, online sessions, and additional assistance beyond allocated workshop times."

First Nations Health Worker Traineeship Program

AHCSA has recently commenced the First Nations Health Worker Traineeship (FNHWT) program to bolster the Aboriginal Health Worker (AHW) and Aboriginal Health Practitioner (AHP) workforce and support Aboriginal Community Controlled Health Registered Training Organisations (ACCHROs). ACCHROs offer culturally safe, holistic primary health care but face significant workforce shortages, particularly in remote areas, impacting access and health outcomes for Aboriginal and Torres Strait Islander people.

The program, led by the National Aboriginal Community Controlled Health Organisation (NACCHO), aims to train up to 500 Aboriginal and Torres Strait Islander trainees in Certificate III or IV of Aboriginal and Torres Strait Islander Primary Health Care through AHCSA's RTO. Trainees will receive culturally safe training, while ACCHROs will provide supervision and support. AHCSA's RTO will also offer additional cultural and educational support to improve completion rates and address workforce development challenges.

AHCSA will also support member services by actively advocating for jurisdictional funding opportunities and identifying additional resources related but not limited to workforce skills and training, and support around traineeship requirements and VET funding opportunities.

AHCSA and Industry Support

Outside of FNHWT, the RTO is currently working collaboratively with Tauondi Aboriginal Health College and Nunkuwarrin Yunti of SA with a shared purpose to enhance the effectiveness of educational and training services for Aboriginal and Torres Strait Islander communities in South Australia. Responsibilities include advocacy for the partnership to potential funders and the broader community such as 'Fee free TAFE Tranche 2' and Skills SA.

The RTO continued to engage with industry stakeholders and programs both inside and outside of the organisation throughout 2023-2024. Education delivery was provided to RTO students by AHCSA's Eye Health, Trachoma Elimination, Ear Health, Social and Emotional Wellbeing and Sexual Health programs.



Constitutional Objective 5

The RTO engaged with a variety of external partners who contribute their knowledge of health issues, including the following:

- SA Health (Royal Adelaide Hospital)
- The Heart Foundation
- Hepatitis SA
- Diabetes SA
- Kidney Health Australia
- Yarrow Place Rape and Sexual Assault Service
- SAMESH
- Adelaide Sexual Health Centre (275)
- SHINE SA
- Pregnancy Industry Network SA
- Sex Industry Network SA.

Training Programs

The RTO continued to provide nationally accredited training over the last twelve months in the following qualifications and skill sets:

- HLT30113 Certificate III in Aboriginal and/or Torres Strait Islander Primary Health Care
- HLT40213 Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice.

These courses come to an end before the new National Qualification Commencement in 2025.

Course Completions

Year in numbers:

88 Active Students during reporting period

- 15 Course Completions
- 25 Continuing Students
- 81 Units of Competency Achieved.

RTO Compliance

Over the past year, our Accreditation and Compliance Coordinator has been working with the RTO team to enhance our policies and procedures to align with the Standards for RTOs 2015. This comprehensive update reflects our commitment to maintaining the highest national benchmarks and delivering exceptional educational services.

In addition to policy updates, we have dedicated substantial efforts to improving our resources. These enhancements not only support our compliance objectives but also elevate the overall learning experience, ensuring our students benefit from the highest possible standards and practices.

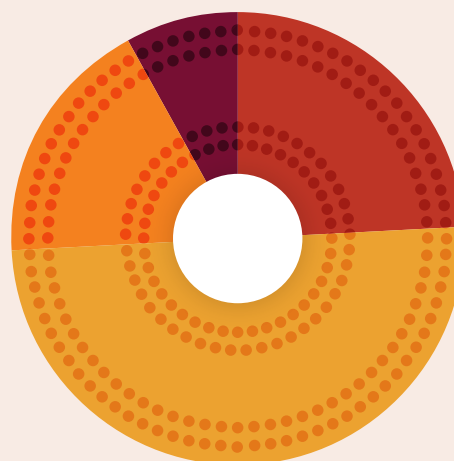
We have also focused on refining our feedback collection processes from students, staff, and the community. By actively seeking and incorporating their input, we ensure that our programs remain relevant and effective, fostering a culture of continuous improvement.

Our efforts have been validated by positive feedback from students. Based on workshop evaluation data for July 2023 to June 2024:

- 98.04% of students would recommend our training to others and would attend training with AHCSA again.
- 90.74% of students found the training delivery to be clear and easy to follow.
- 89.09% of students appreciated that the training delivery was considerate of cultural factors.

Some areas identified for improvement include student time management when returning to class and the limitation of offering training only in Adelaide. All feedback received from students is reviewed, and appropriate actions are identified to ensure the RTO remains responsive. AHCSA's RTO is committed to continually enhancing our service delivery, with direct student feedback being fundamental to this effort.

Unit of Competency Outcomes 2023-24



- Continuing
- Credit Transfer
- Competency Achieved
- Withdrawn

Student Feedback

All the students have opportunities to provide feedback about their training journey and relay any areas for improvement be it about the delivery of the education, the training space, and feedback in general. The RTO takes all feedback seriously and endeavours to make the appropriate changes when and where necessary. The RTO team ensures all components of the delivery are culturally appropriate and ensures a safe and comfortable environment for the students throughout their time at AHCSA.

Positive feedback taken from workshop evaluations:

“Thank you for your support from management to admin- I will be forever grateful to what the team does to get people over the line. In particular I want to acknowledge the Educators for always being humble patient flexible and kind and sharing their knowledge so gracefully.”

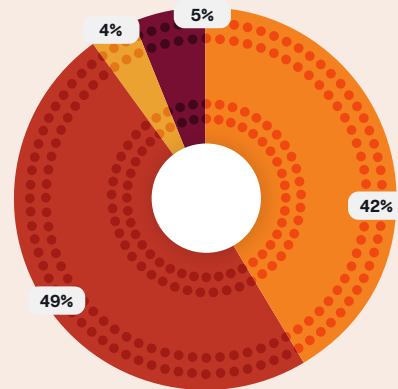
“I really enjoy coming to every block, the Educators are always making sure students understand what they need to do and support our social and emotional wellbeing by always checking in.”

“I enjoy doing the practical skills in the student learning environment and I really enjoy the group scenarios.”

“They are all just too deadly.”

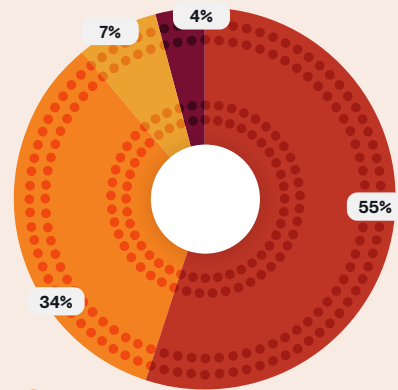
These initiatives highlight our dedication to excellence and our commitment to upholding our reputation as a leading educational provider. Through our ongoing efforts in policy alignment, quality control, and feedback incorporation, we continue to strive for the highest standards in education and service.

The training delivery was clear and easy to follow



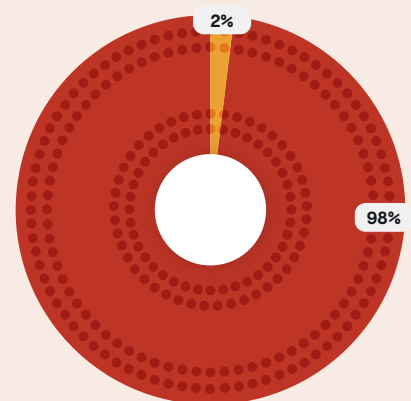
- Agree
- Neither Disagree or Agree
- Strongly Agree
- Strongly Disagree

The training delivery was considerate of cultural factors



- Agree
- Neither Disagree or Agree
- Strongly Agree
- Strongly Disagree

I would recommend training to others and attend training with AHCSA again



- Yes
- Do not wish to answer

Aboriginal Maternal Infant Care (AMIC)

The Aboriginal Maternal Infant Care (AMIC) program aims to improve birthing outcomes for Aboriginal and Torres Strait Islander women, through supporting Aboriginal Controlled Community Health Organisation's (ACCHOs) to provide culturally sensitive, appropriate and accessible antenatal, birthing and postnatal care programs within their local community. The program was created to support women through pregnancy by bringing together AMIC practitioners, midwives, doctors and obstetricians to provide a specialised birthing service. The program will be coordinated by the Aboriginal Health Council of South Australia to Facilitate the establishment of an ACCHO sector led state-wide Aboriginal Birthing Services advisory committee, to provide strategic advice for culturally safe, integrated, high quality Aboriginal birthing programs. Build the capacity of the AMIC workforce, by upgrading the Aboriginal and Torres Strait Islander training skills set to enhance the existing model of care; and deliver accredited training to new AMIC worker trainees. Work in partnership with ACCHO's to recruit and employ AMIC trainee workers, with activities to support Continued Professional Development (CPD) and workforce forums.

Achievements to date include:

- Employment of the AMIC Project Coordinator and the AMIC Midwifery Educator.
- Commenced mapping and scoping of maternity services across Community Control and Government Health Sector.
- The establishment of the AMIC Advisory Committee comprised of Community Controlled Health sector, SAWCAN, government health, tertiary education sector, child and family health and former AMIC workers.



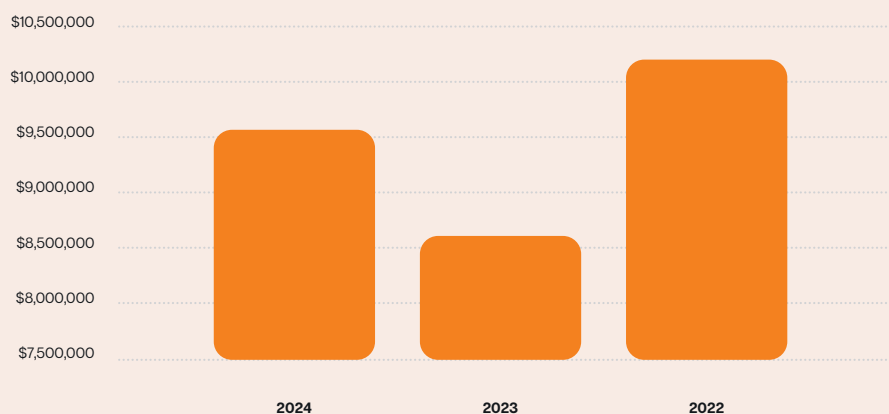


Financial Summary

Statement of Surplus or Deficit and Other Comprehensive Income for the Year Ended 30 June 2024

	2024	2023	2022
Revenue			
Grant revenue Grant revenue	\$9,565,808	\$8,635,811	\$10,193,921
Other revenues	\$202,417	\$1,084,496	\$318,075
Total Revenue	\$9,768,225	\$9,720,307	\$10,511,996
Expenses			
Employee benefits expenses	\$5,403,030	\$4,623,762	\$5,330,244
Goods and services expenses	\$3,094,336	\$2,311,691	\$2,520,764
Finance costs	\$5,321	\$4,579	\$8,001
Depreciation expenses	\$139,637	\$144,193	\$126,898
Amortisation on intangibles	\$0	\$16,763	\$93,881
Total expenses	\$8,642,325	\$7,100,987	\$8,079,788
Total Comprehensive Income for the Period	\$1,125,899	\$2,619,319	\$2,432,208

Grant Revenue



Statement of Financial Position for the Year Ended 30 June 2024

	2024	2023	2022
Assets			
Cash & Cash equivalents	\$10,804,716	\$6,528,821	\$3,994,198
Property, plant and equipment	\$11,257,648	\$11,147,121	\$11,265,119
Trade and other receivables	\$1,051,275	\$387,761	\$30,369
Other assets	\$13,452	\$65,805	\$94,618
Total Assets	\$23,127,091	\$18,129,508	\$15,384,304
Liabilities			
Borrowings	\$0	\$0	\$0
Employee benefits	\$439,242	\$380,580	\$639,241
Trade and other payables	\$633,355	\$394,849	\$511,444
Other liabilities	\$5,709,728	\$2,135,213	\$1,634,072
Total liabilities	\$6,782,325	\$2,910,642	\$2,784,757
Net Assets	\$16,344,766	\$15,218,866	\$12,599,547
Equity			
Asset revaluation	\$5,471,831	\$5,471,831	\$5,471,831
Retained funds	\$10,872,935	\$9,747,035	\$7,127,716
Total Equity	\$16,344,766	\$15,218,866	\$12,599,547



Aboriginal Health Council of South Australia limited Directors' report

30 June 2024

The directors present their report, together with the financial statements, on the company for the year ended 30 June 2024.

Operating results

The company incurred an operating surplus for the year of \$1,125,900 (2023: \$2,619,320 surplus).

Principal activities

The Aboriginal Health Council of SA Limited (the 'Company') is the peak body representing Aboriginal community controlled health and substance misuse services in South Australia.

The principal activities of the company during the financial year are:

- Appointment of new staff to the Company's Secretariat
- Regularly updating the Company's website
- Reviewing operational policies and procedures
- Visiting Aboriginal Communities and Member Organisations
- Supporting the members of the Executive and Full Board of Directors
- Prepare for re-accreditation and accreditation through the Australian Health Practitioner, Australian Skills Quality Authority, Australian Service Excellence Standards
- Collaboration with other agencies on research and other projects
- Presenting information about the organisation to various State and National forums
- Advocating on behalf of Members and Aboriginal Communities in relation to Aboriginal health matters
- Provide administration and facilitation support to the Aboriginal Health Research Ethics Committee
- Responding on behalf of the Board on reviews and reports at State and National levels
- Responding to requests for information from students and other members of the public
- Developing strategies to support the ongoing quality and future of Aboriginal Health Worker training and workforce development issues
- Working with Members and Stakeholders to respond to public health matters

No significant change in the nature of these activities occurred during the year.

Significant changes in the state of affairs

There was no significant change in the state of affairs of the company during the year.


Auditor's independence declaration

A copy of the auditor's independence declaration as required under section 307C of the Corporations Act 2001 is set out immediately after this directors' report.

This report is made in accordance with a resolution of directors, pursuant to section 298(2)(a) of the Corporations Act 2001.

On behalf of the directors


Wilhelmine Lieberwirth
Director


Joanne Badke
Director

AHCSA Members Directory

Aboriginal Community Controlled Health Services

NGANAMPA HEALTH COUNCIL

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Tel 08 8954 9040
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Whyalla Norrie SA 5608
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