



**Aboriginal
Health Council
of Western Australia**

Annual Report

2023-2024

**We acknowledge
the Whadjuk people
of the Noongar Nation
as the custodians of the land
that AHCWA is located on
and we pay our respects
to all Elders, past, present,
and future.**

Contents

Overview	
Welcome	2
Chairperson and Chief Executive's Report	4
Organisation	
Vision and Mission	6
Model of Care	7
Four Key Goal Areas	8
Board of Directors	9
Membership	12
Member Services Map	13
Organisational Chart	15
Organisational Values	16
Executive Management Team	17
Operations	
Office of the Chief Executive Officer	18
Business Development	22
Public Health and Continuous Quality Improvement	24
Workforce and Sector Development	38
Corporate Services	45
Financial Summary	51

Annual Report Artwork 2024 by Kieron Pearce



DISCLAIMERS

A. The term Member Service is inclusive of all Aboriginal Community Controlled Health Services (ACCHS) and Aboriginal Community Controlled Health Organisations (ACCHO) that satisfy the membership requirements of the AHCWA Constitution.

B. The word Aboriginal has been used throughout this document. When referring to Aboriginal we are referring to all Aboriginal and Torres Strait Islander people.

Welcome to the 2023–2024 Annual Report

We open this report by honouring the Whadjuk people of the Noongar Nation as the custodians of the land that AHCWA is located on, and by paying our respects to all Elders, past, present, and future.

We acknowledge the continuing cultural, spiritual, and religious practices of the Noongar people, and celebrate their enduring strength.

To the Traditional Custodians of the lands we have visited and worked across this year, thank you for your generosity and welcome.

To our partners and funders, thank you for taking this journey with us, for supporting our work nurturing strength in culture, community control, and self-determination; and for helping to deliver services for Aboriginal people, led and delivered by Aboriginal people.

The theme for this year's report is *'Moving forward with strength'*, an acknowledgement of the setbacks our communities have faced this past year, including October's Voice to Parliament Referendum; and a reaffirmation of our commitment to the work of advancing health and wellbeing for Aboriginal people and their communities across Western Australia.

The cover artwork, *Ngamma*, or Waterhole, was created by Goreng Noongar man Kieron Pearce, who has connections to Menang and Whadjuk Boodja.

Waterholes are deeply significant to Aboriginal people, both culturally and spiritually. They not only provide crucial water in Australia's challenging environments but also hold sacred meaning, tied to Dreamtime stories, ancestral beings, and traditional wisdom passed down through generations.

Waterholes are crucial for sustaining life, offering a reliable water source for wildlife, plants, and people, particularly in areas where water is scarce.

Water is the giver of life, sustaining all living beings and ecosystems, essential for growth, strength, and survival.

Chairperson and Chief Executive's Report

As Chairperson and Chief Executive Officer of the Aboriginal Health Council of Western Australia, we are delighted to present some of the highlights of 2023–2024, reflecting a busy and productive year.



Throughout the year as part of the Coalition of Peaks, AHCWA has continued our work with the Joint Council on Closing the Gap, providing advice to State and Commonwealth Australian Governments in support of shared national leadership on reforms essential to improving life outcomes for Aboriginal people. With the Productivity Commission's Report on Closing the Gap highlighting the fundamental changes required to deliver on the National Agreement, this has included a focus on key Closing the Gap targets, and how progress towards Priority Reforms should be measured.

A year on since the 2023 referendum on constitutional recognition of Australia's First Nations people through the establishment of an Aboriginal and Torres Strait Islander Voice, we acknowledge the pain this anniversary stirs for our communities, and we affirm our unwavering commitment to improving the health and wellbeing of all Aboriginal people.

The organisation has sustained its involvement with and advocacy on key state initiatives throughout the year, including the Aboriginal Expenditure Review, sector-strengthening plans,

and the whole of government Aboriginal Community Controlled Organisation (ACCO) Strategy; as well as supporting Jenny Bedford, the sector representative, in negotiations around the National Health Reform Agreement, particularly in relation to the newly negotiated Schedule B: First Nations Health Outcomes.

AHCWA's work in collaboration with the WA Government to strengthen the state's ACCO sector by forming a second WA ACCO Peak Body has borne fruit this past year, with the new Council of Aboriginal Services Western Australia appointing its CEO James Christian in October 2023. AHCWA and CASWA have worked together throughout 2023–2024 on a number of important submissions, including a campaign for reforms to the youth justice system, and advocacy on closure of Unit 18 juvenile wing at Casuarina Prison.

In the vocational education and training space, AHCWA and our Member RTO's have worked with the NACCHO RTO Community of Practice over three years, developing a sector ACCRTO strengthening plan aligned to the Closing the Gap priority reforms to guide the allocation of skills funding over a decade under the Commonwealth's National Skills Agreement.

This year, with funding from the Department of Health, AHCWA has developed a contemporary Aboriginal Environmental Health Model of Care based on the perspectives, experiences, and aspirations of the ACCHS sector in WA. Our organisation has also commenced discussions with the WA Government to review First Nation-specific programs and sub-programs and identify activities that could be implemented by First Nations-led and community controlled organisations.

In closing, we would like to extend our gratitude to the AHCWA Board of Directors for their leadership and guidance, and to our AHCWA staff for their tireless work implementing the strategic intent of the Board. We also offer our heartfelt thanks to all our Members, partners, and stakeholders who support us in doing the work that we do to improve health outcomes for Aboriginal people and their communities.



Vision and Mission

Our Vision

Aboriginal people in Western Australia enjoy the same health and wellbeing as all Australians.

Our Mission

As the leading authority for Aboriginal health in Western Australia, we strive to strengthen and promote the Aboriginal Community Controlled Health Services Model of Care, empowering Aboriginal people to achieve health equality in their communities.

The Aboriginal Health Council of Western Australia is the peak body for Aboriginal Community Controlled Health Services in Western Australia. We exist to support and act on behalf of our 23 Member Services across the state, actively responding to their individual and collective needs.

Model of Care

As the peak body for ACCHS across Western Australia, AHCWA exists to support our Member Services in delivering comprehensive primary health care effectively for Aboriginal people and their communities. Strength in culture, community control, and self-determination underpin everything we do, and we understand that when services for Aboriginal people are led and delivered by Aboriginal people, the outcomes are always better.



Figure 1: ACCHS Model of Care

Four Key Goal Areas

1

Enhance and Promote

the ACCHS Model of Care as the best practice primary health care for Aboriginal people and communities.

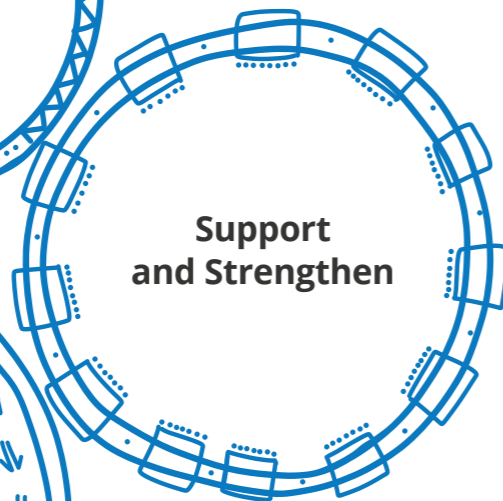


Enhance and Promote

2

Support and Strengthen

our Member Services to achieve excellence in service delivery.



Support and Strengthen

3

Lead and Influence

the state and national Aboriginal health policy and research agenda as determined by our Member Services.



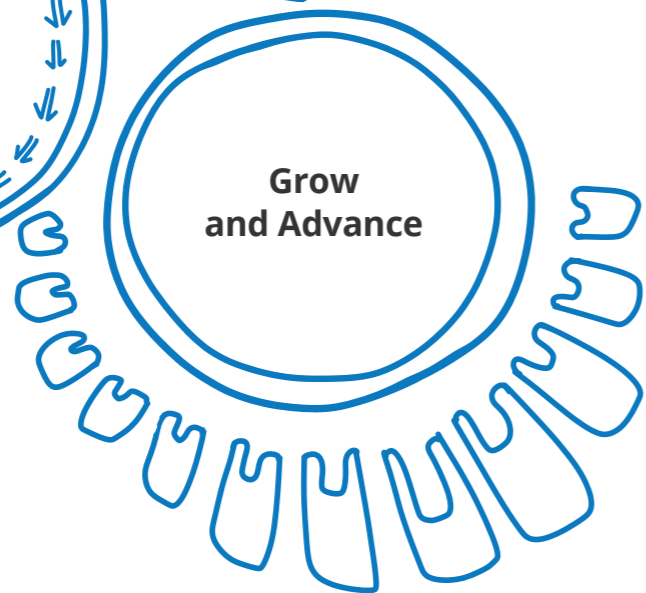
Lead and Influence

Grow and Advance

4

Grow and Advance

the capacity and capability of AHCWA and our Member Services for long-term sustainability.



Board of Directors

AHCWA is governed by an all Aboriginal Board of Directors, representing the ACCHS and their communities in the seven regions of Western Australia.

The Board of Directors consists of 12 Directors, all of whom are at least 18 years of age and Aboriginal and Torres Strait Islander heritage.

The Board of Directors meet bi-monthly, and the AHCWA Executive Managers also attend the meetings alongside the Chief Executive Officer.

EXECUTIVE DIRECTORS



VICKI O'DONNELL OAM
Chairperson

Vicki is a Nyikina Aboriginal woman from Derby and has been a leader in Aboriginal Community Controlled Health for the past 16 years. Vicki has been the CEO of the Derby Aboriginal Health Service and is currently the CEO of the Kimberley Aboriginal Medical Service (KAMS) in Broome. Vicki has been a Director of AHCWA for over 16 years, spending eight years as the Chairperson. In 2022, Vicki received the Medal of the Order of Australia (OAM) in the General Division for service to the Aboriginal community of Western Australia.



CHRISTOPHER (CHIPS) BIN KALI
Deputy Chairperson

Chris was born in Derby and is a Bardi Jawi and Gidja man from the Kimberley. He spent 10 years working within the education system, then moved into the Government sector as a Field Officer at the Department of Education, Employment, and Training. Chris was the Broome Regional Aboriginal Medical Service (BRAMS) CEO for nearly nine years. Health has been a significant part of his life for over 16 years, either working in the Aboriginal Medical Service or as a Director. Chris has contributed to the better health of Indigenous people over the years and looks forward to continuing to work for people.



FABIAN TUCKER
Secretary

Fabian was born in Kalgoorlie and is a Wongatha man from North Eastern Goldfields. Fabian has been a Director since 2006 and the Chairperson of Bega Garnbirringu Health Service (BGHS) since 2007. Fabian has been a Director of the AHCWA Board since 2007 and commenced as Secretary in 2017. He has established and succeeded several businesses over the last 21 years and has overseen BGHS' growth and success in the previous 15 years.



JUNE COUNCILLOR
Treasurer

June, a proud Banjima woman, has been the CEO of Wirraka Maya Health Service Aboriginal Corporation (WMHSAC) in South Hedland since 2012. For three years before that, she was the Indigenous Advisor to the Office of the Ombudsman WA (the Parliamentary Commissioner for Administrative Investigations), advising on the child death review team and supporting the complaints investigation team on Indigenous issues. June is passionate about Aboriginal child and maternal health and issues such as Fetal Alcohol Syndrome (FASD). She has engaged WMHSAC with the Telethon Kids Institute to work to make FASD history in the Pilbara.

REGIONAL DIRECTORS



ERNIE HILL
South West

Ernie is a proud Ballardong Wardandi man who grew up and has spent most of his life in Wardandi country. He has a passion for empowering and raising the voice of Aboriginal people in the South West. Ernie is the South West Aboriginal Medical Service's (SWAMS) Chairman and Director of AHCWA. He is the Chairperson of the Goomburrup Aboriginal Corporation (GAC) and Catch a Dream Inc. He is also a Board member of Advocacy South West. Ernie is passionate about Closing the Gap and improving the health and wellbeing of Aboriginal people.



STANLEY WATSON
Pilbara

Mr. Stanley Watson is a respected Elder of the Nyiyaparli people of the East Pilbara region. He is the Chairperson of Puntukumu Aboriginal Medical Service (PAMS) and a representative of the Karlka Nyiyaparli Aboriginal Corporation (KNAC). Hailing from the Martu through his mother and Nyiyaparli from his father, Stanley grew up in Marble Bar and Port Hedland, and now calls Newman home, where he is an integral part of the community. In his professional capacity, Stanley works closely with several mining companies, focusing on land surveying to ensure the preservation and protection of cultural heritage and history. Stanley is driven by a passion for making a positive impact in his community.



RACHEL MALLARD
Gascoyne Murchison

Rachel was born in Geraldton with a connection to both Wajarri and Nhanda. Her mother and father founded Geraldton Regional Aboriginal Medical Service (GRAMS). Rachel is passionate about family, culture, and Aboriginal health and is committed to continuing her parent's legacy. She believes that without good health, you have nothing. Rachel is the Chairperson of the Barrell Well Community. She is also a Board member of GRAMS and the Hutt River Cultural Committee and a Director of AHCWA.



ERIC SIMPSON
Goldfields

Eric was born in Geraldton, and worked for many years across the mining sector around Meekatharra, before moving to Wiluna to run a mechanics workshop at the request of his family. Eric has been the Director of the Ngangganawili Aboriginal Health Service (NAHS) since 2011 and Chairperson since 2015. A compassionate man who raised his family as a single dad, he is committed to helping the local community. Eric sees this service to the local community as his way of giving back.



RAYMOND CHRISTOPHERS
Kimberley

Raymond Christophers is an Aboriginal man of Bardi descent from the Dampier Peninsula. Raymond is the CEO and Managing Director of Nirrumbuk Environmental Health and Services. Ray has been a member of the Nirrumbuk Aboriginal Corporation for 26 years and a Director for 24 years. Ray became a Member/Director of his local Aboriginal Medical Service (BRAMS) and then a KAMS Council representative. Ray holds the position of Deputy Chair on the Board of KAMS and Director on the Board of AHCWA.



PRESTON THOMAS
Central Desert

Preston, known as "Mr. T," was born in Mount Margaret and is a Wongi man who works in the Ngaanyatjarra Lands. Preston is a former Deputy Chairperson of the Aboriginal Land Trust. He is currently the Deputy Chair of the Ngaanyatjarra Group (which includes the Ngaanyatjarra Council Aboriginal Corporation, Ngaanyatjarra Services, and Ngaanyatjarra Health Service). Mr. T is also the Chairperson of the Kanpa Community Council. He is an active member of the Aboriginal Legal Service of WA and has been a Director of the AHCWA since 2015. Preston has served as WA representative Director on the NACCHO Board for two years.

Membership

AHCWA exists to support and act on behalf of the Aboriginal Community Controlled Health Services in Western Australia. ACCHS are legal entities with at least 75 per cent Aboriginal and/or Torres Strait Islander directorship and membership. They deliver comprehensive primary healthcare in Western Australia to the community that controls them.

The Aboriginal Community Controlled Health Services Sector is a dynamic industry within Australia, operating from a holistic service delivery model.

AHCWA has 23 active Member Services operating 73 clinics across seven Western Australia regions. They provide holistic and culturally appropriate primary health care and Aboriginal health related services to their community.

They are governed by an Aboriginal Board of Management elected by their local Aboriginal Community.

Aboriginal Community controlled, holistic primary healthcare

Healthcare professionals work together to deliver a range of healthcare services. They are dedicated to providing culturally safe, primary health care to Aboriginal people. For Aboriginal people, primary health is the whole Community approach to achieve good health and wellbeing.

Delivering a range of healthcare services

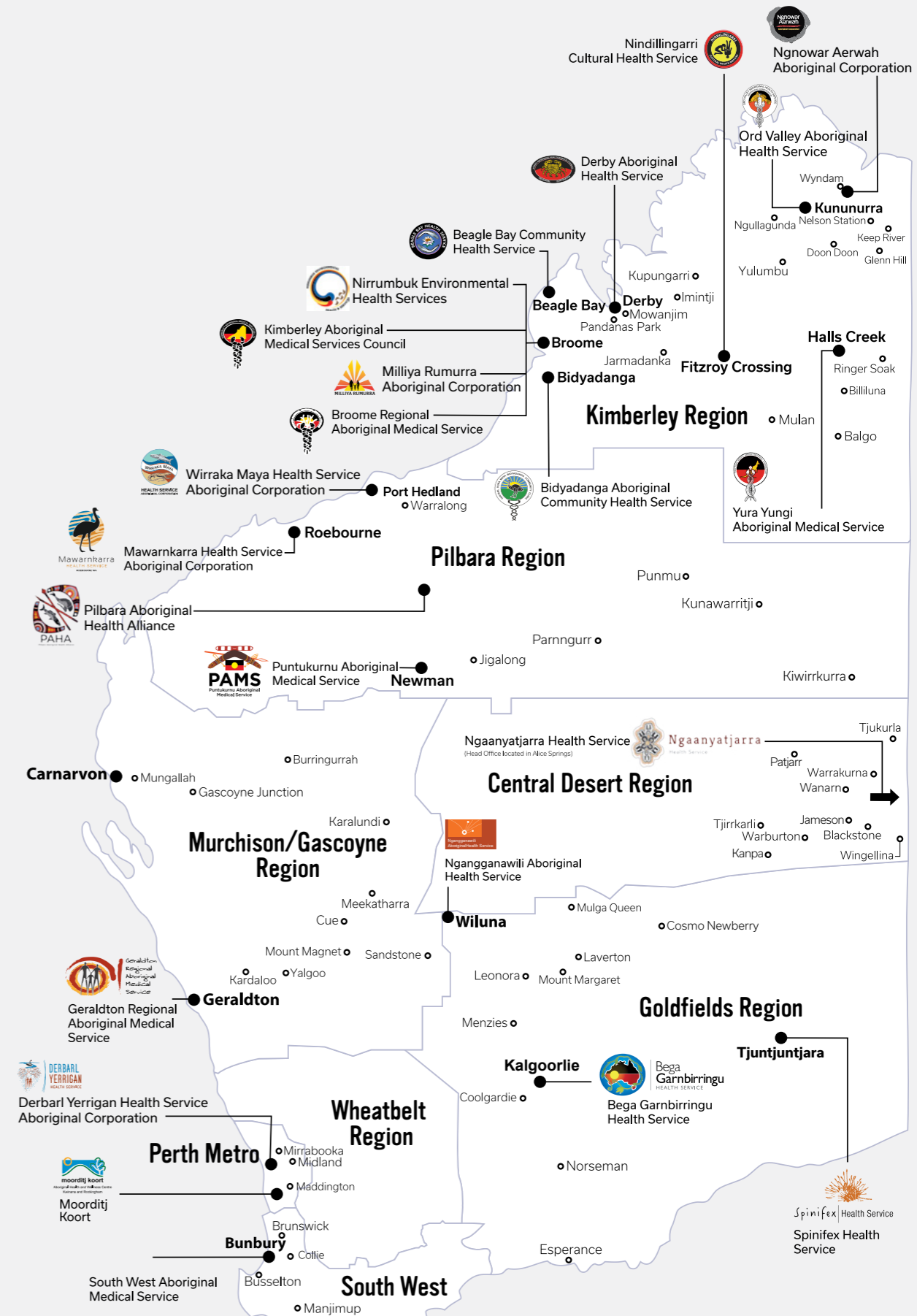
Healthcare services that are preventative and focus on health education include:

- child and maternal health
- oral and dental health
- health checks
- eye and ear health
- preventative programs to quit smoking and health and wellbeing
- social, emotional, and wellbeing services.

PAMS outreach in the Pilbara



Member Services Map



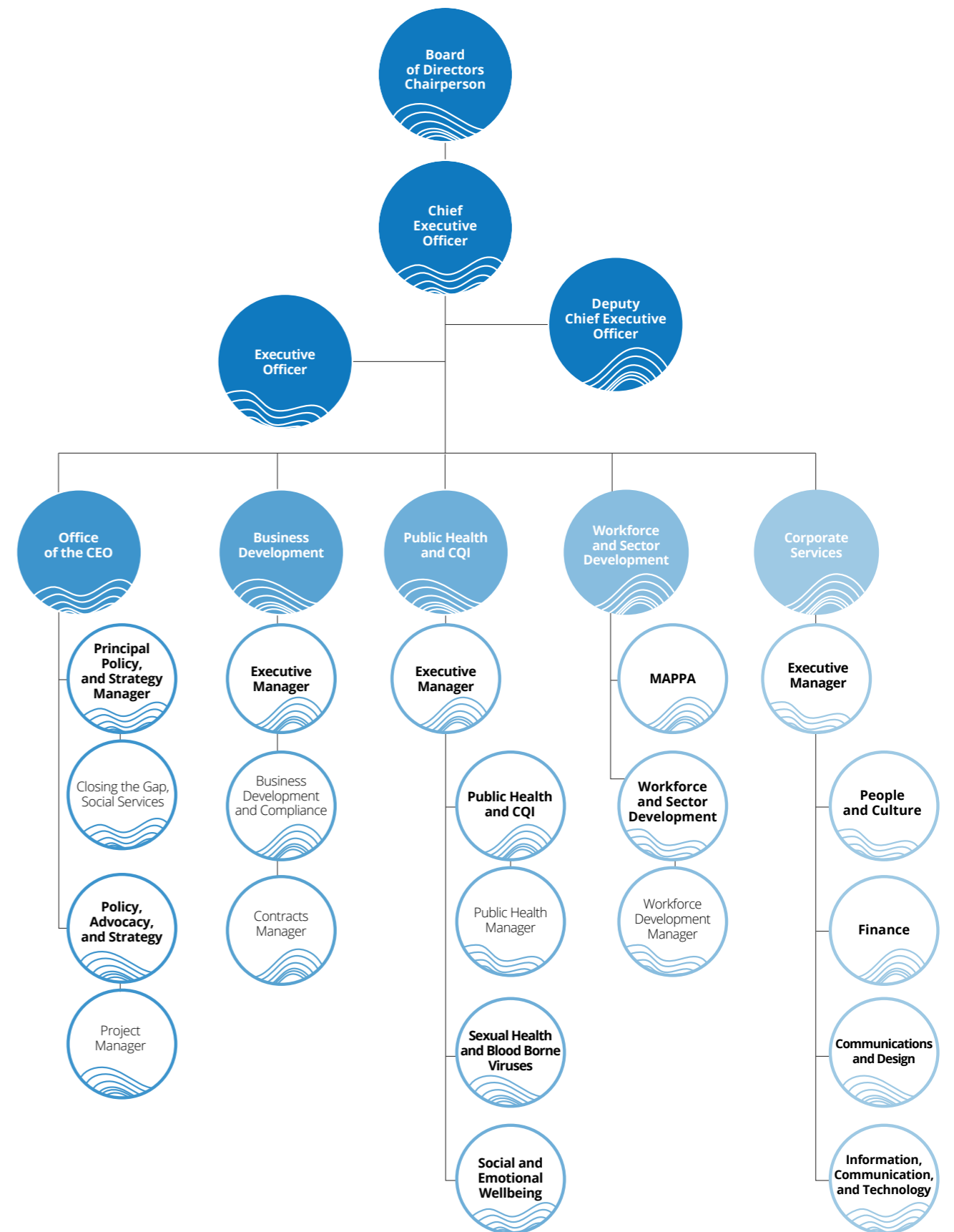
“ Today we reflect on how far we have come, as well as how far we will go. 2024 and beyond, we need to disrupt the status quo for transformation and aim for the greatest level of inclusion. ”

—VICKI O'DONNELL (OAM), AHCWA CHAIRPERSON
ON NATIONAL CLOSING THE GAP DAY

READ MORE:



Organisational Chart



Organisational Values



Culture

Acknowledging and understanding the importance and diversity of Aboriginal culture in all that we do.



Integrity

Working with personal and collective integrity while striving to achieve service excellence for our Members and community.



Passion

Exhibiting passion, positivity, and commitment in all we do to inspire and empower all people, Member Services, and communities to reach their potential.



Collaboration

Fostering and contributing to shared objectives through inclusiveness and engagement with our Member Services.



Accountability

Being accountable to all our Members, stakeholders, and the community.



Resilience

Embracing challenges and harnessing opportunities to empower our communities for self-determination.

Executive Management Team



DES MARTIN Chief Executive Officer

Office of the CEO, Closing the Gap Social Services, Policy Advocacy and Strategy, Care and Support Ready Project, Sector Engagement



AMANDA COLLINS-CLINCH Deputy Chief Executive Officer

Ethics, Mappa, Workforce and Sector Development



KIM GATES Executive Manager

Public Health, Sexual Health and Blood Borne Viruses, Social and Emotional Wellbeing



TRINA PITT Executive Manager

People and Culture, Finance, Communications and Design, Information, Communications and Technology, Administration

Office of the Chief Executive Officer

The Office of the Chief Executive Officer provides executive and administrative services to the organisation and the AHCWA Board of Directors. This work unit encompasses a Closing the Gap – Social Services Team and a Policy and Strategy Team working across a broad range of advocacy, consultation, and policy, and coordinating research, engagement, and executive services.

Policy, Advocacy, and Strategy Unit

AHCWA's Policy, Advocacy, and Strategy Unit aims to promote ACCHS Model of Care and service excellence, and influence policy at all levels of Government.

Throughout the 2023–2024 year, AHCWA's Policy, Advocacy, and Strategy Team has worked to elevate the voices of our Member Services by taking part in national and state inquiries and reviews. In August 2024, the Policy Team advocated at the public hearing of the Senate Select Committee into the Provision of and Access to Dental Services in Australia, expanding on the submission to address the challenges of dental healthcare across Western Australian communities. The Team also provided a submission to the Standing Committee on Health, Aged Care, and Sports Inquiry into Diabetes, working with Member Services and Aboriginal-led research alliances to demonstrate best practice wrap-around care, strengths-based service design, and clinical excellence required for people with diabetes.

The Policy Team has continued its commitment to prison healthcare, participating alongside Member Services in a national review on First Nations healthcare in prisons in early 2024.

Policy Officers strongly emphasised the need for cultural and clinical governance in prisons, and highlighted that ACCHS are often best placed to provide holistic and comprehensive health services to Aboriginal people engaged in the justice setting. The Policy Team continues to influence the intergovernmental and cross-sectoral focus on prison healthcare to ensure investment and cultural change is being considered across all levels of government.

AHCWA continues to make strides on working with its partners to implement the National Agreement on Closing the Gap. In line with the jurisdictional actions on the National Agreement on Closing the Gap, the Policy Team gave advice to government on the stocktake of partnerships, annual report, and implementation plans across Western Australia, as well as the state's first Aboriginal expenditure review. Lastly, after receiving a budget measure to establish Western Australia's second ACCO peak body, CASWA has now been established. A CEO and executive team have been appointed, as well as a Board of Directors following an Annual General Meeting. CASWA and AHCWA work together to influence policy change and advocate on behalf of its Members on key priorities of the day, in the health sector, and beyond.



The Council of Aboriginal Services Western Australia (CASWA) held its inaugural ACCO Gathering this May 2024

Aged Care

Throughout 2023–2024, AHCWA's Aged Care and Disability Policy Officer provided advocacy at the national, state, and local level to support Member Services' policy influence across a number of areas. In May 2024, AHCWA submitted a formal letter to the Interim First Nations Aged Care Commissioner on the proposed establishment of a permanent, statutory First Nations Aged Care Commissioner. Informed by the perspectives of Member Services and focusing on required changes to ensure culturally safe access to the aged care system for older First Nations people, their carers, families, and communities; the advocacy resulted in a commitment by the Interim Commissioner to deliver a report to each participating community, ensuring transparency, accountability, and information-sharing from consultations.

AHCWA's Disability and Aged Care Policy Officer also engaged with Commonwealth and State Government on issues related to aged care and disability across a range of workshops, collaborative groups, and sub-committees throughout the financial year. Among these were a consultation workshop providing feedback to the Commonwealth on the draft of the new Aged Care Act, which will be integral in shaping the Bill before it is introduced to Parliament, and the National Elder Care Support Yarning Circle. These were fantastic networking opportunities with the sector to engage in shared advocacy efforts for Western Australian ACCHS.

The Aged Care and Disability Policy Officer regularly participates in the WA Aged Care Collaboration Group convened by Commonwealth Aged Care stewards, which brings together various non-government organisations, peak bodies, and government departments to address key issues in aged care. In addition to this platform, AHCWA has maintained strong engagement with Australian Government Aged Care stewards, advocating for essential reforms in First Nations aged care.

As of June 2024, the aged care sub-committees within the regional Aboriginal Health Forums have expanded, now comprising three aged care sub-committees across the South West, Goldfields, and Kimberley regions.

Disability

During the 2023–2024 financial year, policy and advocacy in the area of disability has been highly focused on the Independent Review into the National Disability Insurance Scheme (NDIS Review).

In late 2023, AHCWA provided a comprehensive submission to the NDIS Review. The final report included 26 recommendations and 139 actions, laying out a blueprint for the NDIS reform. While the review featured only one specific recommendation for Aboriginal people, many of the proposed recommendations are likely to impact Western Australian ACCHS and Aboriginal communities.

AHCWA'S 2023 COMPREHENSIVE SUBMISSION TO THE NDIS REVIEW INCLUDED:

26 recommendations
139 actions

All levels of government have accepted the NDIS Review's recommendation that the Commonwealth and States/Territories jointly invest in foundational disability supports, with a particular focus on children with disabilities and developmental concerns. In response to this, the Western Australian Government has begun developing the state's approach to these disability reforms. In May 2024, AHCWA, alongside some of its Member Services, actively participated in the WA Department of Communities' Foundational Supports Early Years workshop, contributing valuable insights to inform Western Australia's response.

AHCWA also responded to the final report from the Royal Commission into Violence, Abuse, Neglect, and Exploitation of People with Disability, emphasising the importance of alternative funding models and the critical need for cultural safety in disability service provision.

Mental Health and Social and Emotional Wellbeing

During 2023–2024, AHCWA's Senior Mental Health Policy Officer represented the organisation on the Mental Health Commission (MHC)'s Head to Health Kids Hub Working Group. Based on a national model, the Head to Health Kids Hubs are intended to target mild to moderate emerging mental illness complexities or developmental difficulties and focus on prevention and early intervention. While there is currently an adult's version of Head to Health operating in Perth, this will be the first service for children (0–12) and their families in Perth, with the vision that future services will be rolled out across regional Western Australia.

The major aim of the Working Group was to develop and adjust the National Model of Service (MoS) to suit the needs of the Western Australian community. Through consultation with our Member Services, AHCWA was able to advocate and provide advice on how the Hub should operate to meet the needs of the local Aboriginal community. AHCWA's advocacy on the MoS centred on creating a culturally safe service with a firm understanding of Social and Emotional Wellbeing (SEWB) as an Aboriginal-designed concept and the importance of clearly articulating this, tracking the Hub's accountability to the Closing the Gap priority reforms, and building strong relationships with the local Aboriginal community and services.

AHCWA was invited to attend a Headspace facilitated SEWB Summit in collaboration with Kimberley Aboriginal Medical Service (KAMS). The Summit aimed to share the learnings of Aboriginal organisations in applying SEWB principles to mainstream-funded services and consider what a SEWB Aboriginal youth wellbeing service model should look like. Key stakeholders from across the country attended, and presentations from various Aboriginal-led organisations highlighted how they are working with youth SEWB models.

Aboriginal youth provided their thoughts and what they felt was needed in this space. AHCWA was able to contribute through engaging in the Summit and

affiliated yarning circles. Policy Officers were able to network with their national contemporaries and bring back learnings to share with AHCWA's own SEWB Team and Member SEWB teams.

The Senior Policy Officer worked with AHCWA's Public Health SEWB Team in joining a workshop hosted by the Wellbeing Informed Care - Kimberley (WIC-K), a partnership between the University of Western Australia (UWA) and KAMS project that focused on SEWB clinical coding. Coding for SEWB has long been an issue as the current coding options and terminology make it difficult for ACCHS to quantify the holistic nature of their healthcare, and for health care providers and SEWB Teams to be aware of and follow up on a patient's SEWB concerns. The SEWB Framework and the domains of Connection to Culture, Country, Community, Family and Kinship, Body, Spirituality, and Mind and Emotions also acknowledges colonisation and entrenched racism as the root cause of adverse social and emotional wellbeing and the impacts on Aboriginal peoples' health. Changing the way information is captured and moving away from a solely bio-medical model to create new ways of coding supports telling the stories of individual human experiences meaningfully through clinical codes. This project is in its early stages, but is vital in comprehensively capturing the work of SEWB teams. From a policy perspective, the data can provide evidence to guide the allocation of resources and interventions, develop policies, and support advocacy efforts.

2023-2024 ABORIGINAL HEALTH PLANNING FORUMS

- 03** Wheatbelt
- 01** Southwest
- 05** Pilbara
- 04** Metro
- 05** Kimberley
- 05** Great Southern
- 02** Goldfields

Sector Engagement

AHCWA's Sector Engagement Officer connects with Member Services, health providers, funders, and AHCWA staff to ensure the voice of the ACCHS sector is amplified to influence national and state policies, and advocates for improved health and wellbeing of Aboriginal people across Western Australia.

Throughout the 2023–2024 financial year, the Sector Engagement Officer attended 25 Regional Aboriginal Health Planning Forums throughout the State, whilst also sitting on a range of sub-committees.

The Men's Health Committee provides Aboriginal men with the opportunity to gather, yarn about health issues affecting them, and discuss ways of addressing them locally, in their own regions. In this way, self-determination and empowerment are at the heart of place-based advocacy and solutions. Many exciting outcomes have emerged from the committee, including but not limited to men's health camps and topic specific gatherings and forums.

The Sector Engagement Officer also provides AHCWA staff with opportunities to participate in sub-committees through the Regional Aboriginal Health Planning Forums, and advocate across areas including:

- Environmental Health
- Maternal and Child Health and Fetal Alcohol Spectrum Disorder
- AOD and Mental Health
- Food Security
- Sexual Health

The Sector Engagement Officer connects Member Services with opportunities to provide strategic advice and advocates on behalf of the sector across partnerships, advisory panels, and focus groups.

The Policy and Advocacy Team works to represent the ACCHS Sector in various other not-for-profit forums and steering committees, raising the profile of the ACCHS Model of Care and increasing funding opportunities for Member Services.



Business Development

This work unit comprises of Business Development and Compliance Team formed with a focus on funding, contracting, governance, accreditation, and compliance. The team works to represent the ACCHS Sector in various other not-for-profit forums and steering committees, raising the profile of the ACCHS Model of Care and increasing funding opportunities for Member Services.

Business Development and Contract Management

The Business Development Team is responsible for:

- identifying income streams and business development opportunities for AHCWA and its Member Services; and
- establishing and managing contracts.

Contract Management
Establish and manage external funding contracts and Member Service sub-contracts

- 1 Contract Development
- 2 Contract Execution
- 3 Monitoring and Reporting
- 4 Review and Evaluation

47 External Funding contracts

- National Aboriginal Community Controlled Health Organisation
- WA Department of Health
- Mental Health Commission
- Department of Communities
- Department of Premier and Cabinet
- Department of Health and Aged Care
- Australian Digital Health Agency
- Western Australian Network of Alcohol and other Drug Agencies (WANADA)
- National Health and Medical Research Council
- Sanofi-Aventis Australia Pty Ltd
- Royal Australian College of General Practitioners
- Telethon Kids Institute

55 Member and Partner sub-contracts



Capacity Building: Family, Domestic, and Sexual Violence Support in WA Aboriginal Community Controlled Health Sector Pilot

\$10,230,000
Department of Communities
Contract extension to 30 June 2025.

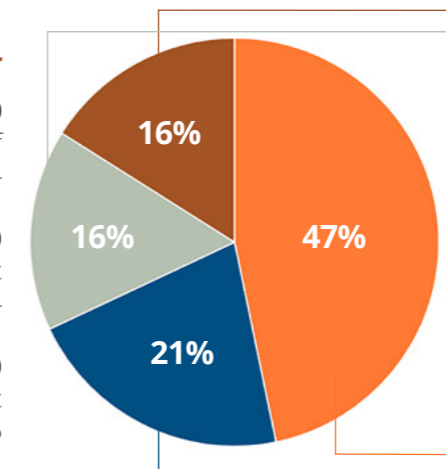
Social and Emotional Wellbeing Model of Service Pilot Program

Mental Health Commission
An extension to 2026 for the existing pilot program was announced in the 2024/25 State Budget.



Lotterywest

- \$375,000**
Crisis and Emergency Relief
Dec 2023–Nov 2024
- \$300,000**
Organisational Development
Dec 2022–June 2024
- \$690,000**
Organisational Development
June 2024–June 2026



- 16% ICT and Marketing
- 16% Legal and Compliance
- 21% Workforce Capacity
- 47% Strategy and Planning



Philanthropic Partners

Our Philanthropic Partners have provided much-needed funding and pro bono services and goods over the past 12 months. We would like to give our sincere thanks to:

Johnson & Johnson

paul ramsay
FOUNDATION
PARTNERSHIPS FOR POTENTIAL

KING & WOOD
MALLESONS

Public Health and Continuous Quality Improvement

The Public Health and Continuous Quality Improvement (PHCQI) Team supports WA ACCHS to encourage and establish best practices in primary healthcare. The Team works at a national, state, and local level to advocate for and assist in positive recognition and improvement in the service delivery for ACCHS in Western Australia.

The PHCQI Team works to support AHCWA's Member Services in addressing a broad spectrum of public health issues, and facilitates the organisation's Public Health Programs.

A focus for this year was on emerging infectious diseases of concern, including Japanese Encephalitis Virus and Tuberculosis. There are two ongoing outbreaks of Tuberculosis within the state that are affecting Aboriginal populations, and the PHCQI Team worked with communities in these areas and with the Western Australian Tuberculosis Control Program throughout the year to increase communications and cultural safety. The PHCQI Team also worked with local ACCHS to create culturally safe Tuberculosis health promotion brochures, which allowed for increased community understanding of the disease. To date there have been no human cases of Japanese Encephalitis in Western Australia, however, the virus has been identified in animals and vectors. In some areas of the state, namely the Kimberley and some postcodes of the Pilbara, Aboriginal people are eligible for a vaccine to prevent infection with Japanese Encephalitis Virus. To help promote this, AHCWA has worked with KAMS and PAMS to develop health promotion materials to assist with uptake of the vaccine. These have been distributed, and will continue into the lead up to the wet season.

Child and maternal health has also been a focus, and the Team have developed the 'Junior Goes to the Doctors' resource, a storybook promoting and explaining child health checks to families. This storybook, as with all PHCQI resources, can be requested by services via AHCWA's Public Health Team.

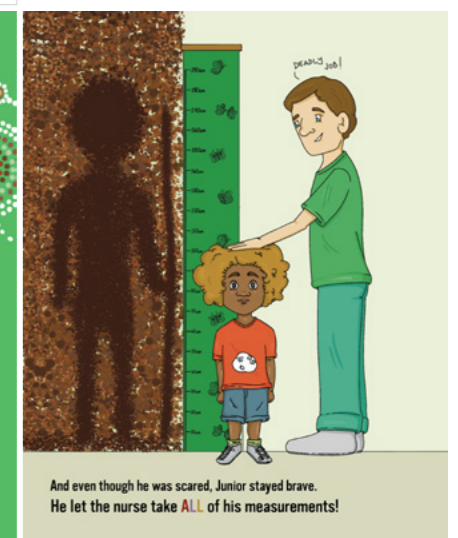
Another success for the PHCQI Team has been the ongoing Clinical Leadership Group meetings, which are opportunities for senior clinicians from each of our Member Services to connect and share ways of working. These meetings are chaired by our Public Health Medical Officer, and often feature invited presenters, allowing for regular upskilling of our senior clinicians across Western Australia. Over the last financial year we have had 10 online meetings and two face-to-face meetings. These gatherings have had great engagement, and have received positive feedback from clinicians in attendance.

The PHCQI Team's area of focus is growing, and during the last financial



... AHCWA has worked with KAMS and PAMS to develop health promotion materials to assist with uptake of the (Japanese Encephalitis Virus) vaccine

The 'Junior Goes to the Doctors' resource promotes child health checks to families



year we held a workshop to upskill Western Australian ACCHS on the Practice Incentives Program, with an emphasis on the Indigenous Health Incentive.

The workshop was facilitated by our Public Health Medical Officer

and included expert advice from our Medical Advisor and the Broome Aboriginal Medical Service (BRAMS) Senior Medical Officer. The workshop was a great success, and with new Medicare Jurisdictional Coordinator on board, the Team hopes we will be able to grow this support in future.

KEY STAKEHOLDERS		
Commonwealth Department of Health	The National Aboriginal Community Controlled Health Organisation	WA Primary Health Alliance
WA Country Health Service	ISA Healthcare	Transforming Indigenous Mental Health and Wellbeing
Australian Digital Health Agency	Telstra Health	Victoria Aboriginal Community Controlled Health Organisation
Rural Health West	University of Western Australia	
East Metropolitan Health Service	First Nations Eye Health Alliance	Aboriginal Medical Services Alliance Northern Territory
North Metropolitan Health Service	Mental Health Commission	Edith Cowen University
South Metropolitan Health Service	Aboriginal Health Council of South Australia	University of Melbourne Eye Health Unit
WA Department of Health	Cancer Council of WA	Communicable Disease Control Directorate
Child and Adolescent Health Services	BreastScreen WA	Department of Communities
KEY MEETINGS		
NATIONAL		
Cancer Australia Expert Reference Group	National Aboriginal and Torres Strait Islander Hearing Health Advisory Panel	National Roundtable Strengthening Community & PHN Collaboration in SH & BBV
Invasive Group A Strep (iGAS) Working Group	National Aboriginal and Torres Strait Island Health Protection Subcommittee	
Mayi Kuwayu National Aboriginal Health Longitudinal Study Reference Group	National Indigenous Advisory Committee for LGBTIQ+ Health Australia	National Centre for Education and Training on Addiction AOD Workforce Reference Group
The National Aboriginal Community Controlled Health Organisation PHMO Group	The National Aboriginal Community Controlled Health Organisation Pharmacy Teleconferences	
STATE		
Eliminate Hep C Working Group	SiREN	WA Health Primary Health Care Forum
Future Health Research and Innovation Fund Expert Committee on Aboriginal Health	Social Emotional Wellbeing (SEWB) Pilot Governance Committee	WA Immunisation Strategy Implementation Committee
Healthy Blood Health Body	Syphilis Outbreak Response Group	WA Japanese Encephalitis Virus Expert Vaccination Reference Group
Liquor Reform Harm Minimisation Working Group	WA Cancer & Palliative Care Network	WA Joint Services Planning & Governance Committee
Palliative WA – Advanced Care Planning Consortium	WA Aboriginal Eye Health Advisory Group	WA Rheumatic Heart Disease Program Clinical Guideline Implementation Subcommittee
WA Rheumatic Heart Disease Program Governance Group	WA Trachoma Reference Group	Australian General Practice Training Program Workforce Planning & Prioritisation
Rural Health Agency Reference Group (Workforce and Training)	WA Aftercare Working Group	Youth Advisory Council WA YEP Youth Sector Reference Group
Rural Health West Statewide Advisory Forum	WA Child Ear Health Steering Group	Walkern Katadjin
Sexual Health & BBV Advisory Council	WA Genomics Strategy	WA Public Health Officer Training Program Reference Group

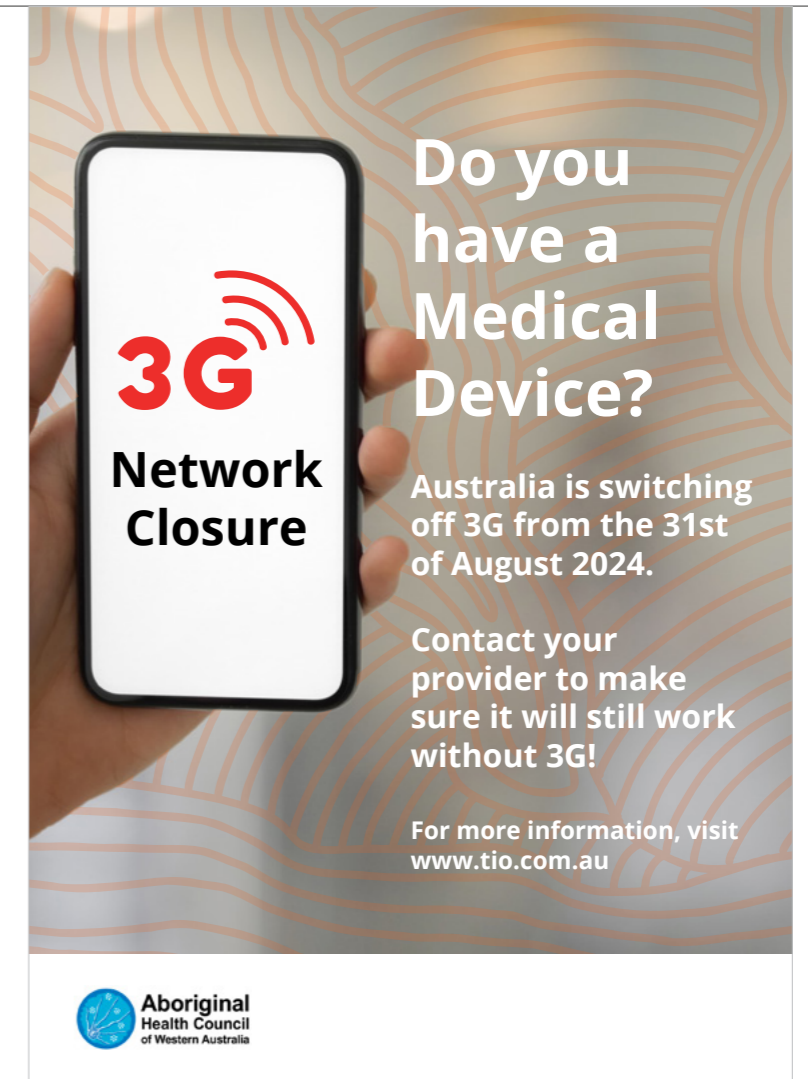
Digital Health

Digital Health is an ever-evolving space, and the PHCQI Team has worked to ensure that the ACCHS are kept abreast of any advancements. One of the ways we do this is via the creation and distribution of newsletters, which promote best practice in ACCHS Primary Health Care. Over the last financial year, 10 of these newsletters have been distributed to AHCWA's networks, as well as ongoing promotion of relevant Digital Health webinars to Member Services.

We continue to engage with Telstra Health to advocate for enhancements in Communicare functionality, with input from lead clinicians across the state. There has also been a continuation of our work with Telstra Health to have the Enhanced Child Health Checks and Universal Health Checks integrated into Communicare as clinical items.

An important development in the digital health space has been the staged introduction of Australian Department of Health's MyMedicare model—a new voluntary patient registration model which aims to formalise the relationship between patients and primary care teams. As part of the model, there is now access to triple bulk-billing incentives for some clients, and other benefits to patients, general practices, and healthcare providers have been promised. There is still limited information on how this will impact services in the future, however, AHCWA will continue to communicate updates and information to Member Services as they become available.

Wider issues, such as the scheduled shutdown of the 3G networks across Australia also fall into the purview of Digital Health, and the PHCQI Team have created Health Promotion pieces to advise on the potential impact to clients. This shutdown is still to come, and AHCWA have supported Member Services with promotional advice for their patients who use 3G phones which will no longer have service. Additionally, some 4G phones and some medical devices may be impacted, and clients are encouraged to contact their provider to make sure they will not be affected.



The PHCQI Team have created health promotion pieces to advise on the impact of 3G network shutdowns

AHCWA's PHCQI Team conducts monthly analyses of My Health Record data to evaluate how ACCHS are using this important secure digital health information platform. It is clear that My Health Record is a vital tool for our sector, and supports best quality patient care through the sharing of key health information between health service providers. This data supports AHCWA PHCQI to provide ongoing support to Member Services optimising My Health Record use, and providing important data to advocate for better sharing of information via My Health Record by Western Australian health entities and private health service providers to enhance continuity of care.

The PHCQI Team was involved in successful advocacy within the digital health space on at least two occasions within the last reporting period. Firstly, following feedback provided by AHCWA to the Australian Department of Health

alongside NACCHO and other affiliates, federal legislation successfully passed through parliament allowing for changes to outdated rules around patients being required to physically sign to consent for bulk billing benefits to be paid directly to a health provider. We look forward to being part of ongoing consultation over the next 12–18 months to have input into the design of more relevant rules that do away with requirements for paper-based forms and provide greater flexibility in how assignment of benefits can be demonstrated. Secondly, feedback by AHCWA and other organisations on MBS Review Advisory Committee's (MRAC) telehealth post-implementation review, MRAC's final report recommended telehealth measures important for our sector. These included retaining MBS video telehealth items for initial consultations with non-GP specialists and reintroducing MBS patient-end support services by GPs for non-GP specialist telehealth consultations.

Climate Health

The Supporting Climate Health Adaptation Planning and Initiatives Project, funded by the Aboriginal Health Policy Directorate, allows AHCWA to fund three pilot sites across Western Australia to undertake Climate Health initiatives. This is a continuation from the previous financial year, and is in its communications phase. The three pilot sites, KAMS, Moorditj Koort Aboriginal Corporation, and Ngaanyatjarra Health Service, were each identified as experiencing heatwaves, the effect of which on health was the focus for this project.

During this financial year, each site completed their own community consultation within their regions through Board meetings, yarning circles, environmental health blitzes, community meetings, local stakeholder advisory groups, and clinician to patient consultations. These were rich engagements that allowed for a deep understanding of community's perception of the impact of heatwaves on health.

The consultations shaped the public health messaging that was created, and brochures discussing how 'Staying Healthy in Hot Times' could be achieved were created and localised to each site through culturally relevant messaging. This included tips on how to prepare for heatwaves, how to stay cool during heatwaves, and how to recover afterwards. The messaging was found to be helpful for clients, and has been adapted for statewide application by AHCWA's Public Health Team.



In response to heatwaves, a suite of public health messaging has been developed around 'Staying Healthy in Hot Times'



AHCWA and the pilot sites continued to meet bi-monthly to discuss progress, consider continuous quality improvement opportunities, update on community engagement outcomes, and resource development. This has been a great source of collaboration, and has allowed the sites to learn from each other.

AHCWA's PHCQI Team is in the process of developing a communications toolkit from the consultations.

The Heatwave Communications Toolkit includes:

- poster suites focused on 'How heatwaves affect body parts' and 'Taking care of our old people when it's hot'
- social media tiles and gif series
- a Clinician Education PowerPoint presentation
- merchandise such as straw hats, buckets hats, hand fans, and fridge magnets.

The final focus for this project is a policy position statement around climate change's effect on health, specifically heatwaves, which will be completed by December 2024.



Eye Health

AHCWA's Eye Health Program works to build fundamental eye health knowledge and screening skills. The remoteness of many Western Australian communities contributes to reduced access to specialist services and missed opportunities to identify vision disorders in Aboriginal people. The Program's training, resource development, and partnerships aim to develop culturally sound, evidence-based tools to support the ongoing work in eye health within the Sector, building confidence of Aboriginal Health Workers and Aboriginal Health Practitioners to complete eye assessments.

The AHCWA Eye Health training package supports ACCHS staff to deliver culturally safe services which:

- identify different eye conditions
- feel confident to have conversations with patients about their eye health
- understand the differences between reversible and irreversible vision impairment
- use resources and equipment correctly including retinal scanner operation
- navigate referral processes with other key stakeholders

05 regions visited across Western Australia

81 participants reached

SERVICE	REGION	DATE
Derbal Yerrigan Health Service	Metro	February 2024
Mawarnkarra Health Service	Pilbara	February 2024
Geraldton Regional Aboriginal Health Service	Murchison	February 2024
Derbal Yerrigan Health Service	Metro	March 2024
Gascoyne Outreach Service	Murchison	April 2024
Derby Aboriginal Health Service	Kimberley	May 2024
Broome Aboriginal Medical Service	Kimberley	May 2024
Bega Garnbirringu Aboriginal Health Service	Goldfields	June 2024

This year, the AHCWA Eye Health Coordinator has visited five regions across Western Australia and provided training to 81 participants from eight sites, educating on the importance of eye health as well as promoting best practice knowledge and skills across AHCWA's Member Services statewide.

AHCWA is also supporting advocacy work via a number of collaborations, working groups. Key Stakeholders, including the University of Western Australia, Rural Health West, First Nations Eye Health Alliance, Lions Outback Vision, Diabetes WA, Indigenous Eye Health Unit Melbourne University, and NACCHO have supported our progress and advocacy

through partnerships and continuous quality improvement projects.

AHCWA's Eye Health Coordinator represented our ACCHS at a number of conferences and workshops during the 2023-2024 year, including the NACCHO National Affiliates Eye Health Meeting on determining future directions for eye health in Australia. In November, the National Trachoma Stakeholder Workshop engaged members of the Western Australian Trachoma Reference Group and the Rural Health West Aboriginal Eye Health Working Group and explored ways forward post elimination of Trachoma as a public health issue in Australia.

Figure 1: WA Aboriginal Eye Health 2024 Forum graphic recording



In June 2024, AHCWA partnered with Rural Health West to coordinate the inaugural Aboriginal Eye Health Forum, at which AHCWA's Eye Health Coordinator presented on Cultural Safety in Eye Health.

In May 2024, AHCWA presented at the National Aboriginal and Torres Strait Islander Eye Health Conference on the Eye Health Program developed by the organisation for the Western Australian ACCHO Sector. AHCWA also provided the opportunity for eight bursaries to be awarded to health workers across the Sector to attend the conference in Hobart, Tasmania.

Also during the 2023–2024 year Johnson & Johnson, principal funders of the AHCWA Eye Health Program, joined the Eye Health Team on a remote visit in the Kimberley. The visit gave the funders an opportunity to explore how their backing is enabling the incredible work our ACCHS do to make a difference in communities, as well as offering a deeper understanding of the challenges faced by those living in remote Western Australia.

“I was grateful to attend the NATSIEHC24 with the support of AHCWA. I was able to network with some amazing people in the eye health scene and took away how much Western Australia is lacking from a state level around the NSSS. I look forward to being able to upskill with Jess from AHCWA to ensure all AHP's at SWAMS feel supported to be able to deliver good eye health care here at the clinic.”

– NATSIEHC24 BURSARY RECIPIENT

Immunisation

As part of our public health awareness and prevention activities, AHCWA delivers immunisation education and training to the Aboriginal Community Controlled Aboriginal Health Practitioner workforce, funded by the Western Australian Department of Health. The training provides an opportunity to build the capacity of the ACCHS workforce and deliver best-practice immunisation services with the goal of closing the gap in immunisation rates in Western Australia.

During the 2023–2024 year, AHCWA's Immunisation Training course content and delivery was reviewed and revised in line with the National Immunisation Education Framework for Health Professionals, ensuring compliance with current Western Australian Structured Administration and Supply Arrangements requirements. The framework requirements are endorsed by the Western Australian Department of Health Communicable Disease Directorate, guaranteeing they provide best practice information, skills, updates, and resources to our Member Services.

During the 2023–2024, AHCWA's Immunisation Educator delivered five training workshops, engaging 19 participants across metropolitan and regional Western Australia with the opportunity to improve their technical knowledge and skills and increasing their confidence and competence in safely delivering and discussing immunisation with their communities.

“I want to thank you for all the opportunities you've given me this year, especially supporting me to network with yourself, the Indigenous National Eye Health Conference, and UWA. I am forever grateful for the opportunities.”

– NATSIEHC24 BURSARY RECIPIENT

2023–2024 HIGHLIGHTS

05 training workshops delivered across Western Australia

19 participants engaged

“The training was very educational for us and we found your teaching methods clear, informative, and knowledgeable. Would love to have more training with you and Mel again in the future.”

– SENIOR ABORIGINAL HEALTH PRACTITIONER

Vaccine hesitancy and vaccine fatigue remain an issue in the ACCHS sector and a focus for AHCWA. During the 2023–2024 year, resources have been designed to enhance positive health promotion messaging in an attempt to drive immunisation discussion and uptake. AHCWA immunisation training for Aboriginal Health Practitioners and Aboriginal Health Workers has provided the opportunity to increase the health literacy of the workforce and enable informed clinical yarning to dispel vaccine-related myths and further vaccine safety.

AHCWA has continued to develop and design culturally appropriate and regional specific resources for Member Services. A Shingrix awareness campaign was developed in partnership with our Member Services to raise awareness about the change in vaccination brands used by the National Immunisation Program and to promote eligibility to access the free vaccines through the ACCHS clinics. The campaign also raised awareness of the health benefits of the shingles vaccination.

Promotion of seasonal vaccinations for Influenza and COVID-19 booster vaccination were included in promotional awareness materials developed to encourage uptake of both. AHCWA also provided health messaging around the importance of vaccination whilst pregnant.

AHCWA is represented on a number of working and key stakeholder groups, engaging with Members and services regularly and partnering on key initiatives to ensure the ACCHS sector is included in all immunisation aspects of Closing the Gap. AHCWA contributed to the development of the new Western Australian Immunisation Strategy 2024–2028, a collaboration between the Western Australian Department of Health and key government agencies, representing our Member Services to ensure inclusions reflected the needs of the Sector.

The release of a stand-alone Aboriginal Immunisation Schedule in Western Australia has enabled focused discussions relating to the additional vaccinations required for Aboriginal people and the reason for these. During the year, AHCWA facilitated a collaboration between Western Australian Primary Health Alliance and Boorloo Public Health Unit to present on the stand-alone schedule, so as to support service providers to confidently discuss the vaccine schedule, reduce hesitancy, and improve uptake across ages.

In March 2024, a national-first Respiratory Syncytial Virus (RSV) vaccination program was announced following intensive research and consultation. The program was launched in an attempt to reduce hospitalisation of infants as a result of increased cases of RSV. RSV is a highly infectious virus affecting the lungs and airways. RSV infections are usually mild but can cause severe bronchiolitis and pneumonia. RSV infection early in life is also associated with development of childhood asthma. More than 1,000 infants are hospitalised with RSV-disease in Western Australia each year.

Promotional awareness materials have been developed for Shingles, RSV, and COVID-19 vaccination



“My thanks to the AHCWA team for helping us make the program a success. I think when you read the nomination it really strikes you how much effort and collaboration it took to get us to this point. And whether we win or lose, we will have the ultimate satisfaction of knowing we have kept thousands of Western Australian infants from getting sick and hundreds from being hospitalised by RSV this winter.”

– PROFESSOR PAUL EFFLER A/DIRECTOR COMMUNICABLE DISEASE DIRECTORATE, WA DOH

The Program provides nirsevimab to the cohorts of children at highest risk, including infants entering their first RSV season, and Aboriginal children entering their second season. The program has already made a positive impact in reducing hospitalisations across the state. AHCWA were involved in early

decision-making and information sharing and produced a number promotional resources which have been widely used to encourage RSV immunisation in Aboriginal children across sectors. Our Member Services have worked hard throughout the year to promote and immunise eligible children.

Medicare Benefits Scheme

AHCWA received funding from NACCHO for a Medicare Benefits Scheme Jurisdictional Coordinator. The aim of this new program is to work in collaboration with the NACCHO National Coordinator, other Jurisdictional Coordinators, and Western Australian ACCHS to optimise Medicare Benefits Scheme claiming. The Scheme will collaborate on the design and development of nationally consistent resources and tools and will work with Western Australian ACCHS who request support to assess current Medicare Benefits Scheme claiming and identify gaps for improvement through Continuous Quality Improvement activity. The scheme offers assistance to ACCHS staff through training and education support to strengthen and improve Medicare Benefits Scheme program claiming practices and keeps the ACCHS Sector informed and updated on any Medicare changes and reforms.

Since the commencement of this new program, the Jurisdictional Coordinator has been exploring the Sector need and upskilling requirements in order to design methods for improving knowledge of the Medicare Benefits Scheme and Practice Incentive program. The Coordinator is working toward the development of a community of practice for the WA ACCHS as a platform to provide and share information and resources.

Sexual Health

AHCWA's Sexual Health and Blood Borne Virus Team provided ongoing support to our Member Services through capacity building and health promotion activities to increase sexual health and wellbeing awareness, and highlight the importance of testing for STIs and BBVs. Funded by the Western Australian Department of Health, the program offers Sector support, youth peer education, and interagency collaboration and features face to face and online education and training session called The Birds and BBVs, the Young Leaders Program, and online weekly 'Bites' workshops delivered in partnership with key stakeholders. AHCWA works closely with our Member Services and the Department of Health on the program and are pleased to have existing MoUs with Sexual Health Quarters, WAAC, Hepatitis WA, and YACWA.

“This is excellent training to help me to get back my confidence and equipped to yarn this to our patients. Thank you so much, well delivered training.”

– WORKSHOP ATTENDEE

Birds and BBVs Workshops

The Birds and BBVs training aims to increase the knowledge, skills, and confidence of health workers to discuss sexual health matters, promote the importance of STI and BBV testing, and identify ways to help break down the associated shame and stigma. Over the 2023–2024 year, AHCWA, in partnership with Hepatitis WA and WAAC, delivered seven Birds and BBVs trainings across the state, attended by 59 staff from ACCHS and other services that work with Aboriginal people including WA Country Health Service. Participants included Aboriginal Health Workers and Practitioners, Aboriginal Liaison Officers, Health Promotion Officers, Administration and Reception workers, Nurses, Doctors, Youth Workers, and Outreach Workers.

“Presenter was well informed, experienced, and presentation style is inspiring.”

– WORKSHOP ATTENDEE

Health promotions have been developed to increase sexual health and wellbeing awareness

Needle and Syringe Program

AHCWA's PHCQI Team developed a Setting up a Needle and Syringe Program Factsheet with advice from the SHBBV Team and Department of Health Needle and Syringe Program Team. Team members undertook the Mental Health Commission's online NSP Orientation and Training package and attended the NSP Coordinator workshop in person, and highly recommend both, even to those who work in services who are yet to set up a Needle and Syringe Program.

AHCWA's PHCQI Team have produced a new Needle and Syringe Program factsheet

How to set up a Needle and Syringe Program (NSP) in your service



Needle and syringe programs (NSP) provide sterile needles and syringes, health harm reduction information and important referrals for people who inject drugs. It prevents them and others from getting blood-borne viruses like HIV, hepatitis C and hepatitis B. NSPs also support safe disposal of used equipment.

The Sexual Health and Blood-borne Virus Program (SHBBVP) at the Department of Health coordinates the needle and syringe program across WA, including the supply of sterile needles and syringes for distribution by approved sites.

The SHBBVP can assist you to work through the application process. This will include:

- 1 Yarning with your team and community about the benefits of NSP services
- 2 Nominating an NSP coordinator
- 3 Determining opening hours and locations for your NSP
- 4 Completing an Application Form for approval of a Needle and Syringe Program.
- 5 Developing guidelines to inform staff how the NSP will operate
- 6 Submitting these documents to nsp@health.wa.gov.au

The NSPs can be provided in different ways depending on what would work best for your service. Things to consider:

- Would you like to assist clients face-to-face over the reception area?
- Could you have a dedicated room to facilitate the program?
- Do you need a confidential entry/exit to ensure client confidentiality?
- Would an outreach service be an option for your community?
- Would a needle and syringe dispensing machine be an option for your site?
- Would provision of needles and syringes during patient consults with a AHP or health worker work best for your community?

Talk to the team at the SHBBVP to discuss how your NSP could best meet the needs of people in your local community: nsp@health.wa.gov.au

The NSP Online Orientation and Training Package is a free online training package that will give you the rundown on how to effectively provide NSP. Scan this QR code to access the training. Sign up for a password and then follow the prompts.



The Bites Online Sexual Health and Reproductive Health Information sessions

The Bites' have been developed as an online opportunity for staff working in Sexual Health within ACCHS and other service providers working with Aboriginal people. They aim to improve access to up-to-date information, resources, and support from other Health Service providers with the aim of decreasing the incidence of Sexually Transmitted Infections and Blood Borne Viruses in Aboriginal communities across Western Australia.

41 'Bites' recordings on AHCWA's website and Youtube channel

1,500+ views between them

The Bites' online sexual and reproductive health sessions

WA Cervical Cancer Prevention Program (WACCPP) workshops

The Sexual Health Team assisted the WA Cervical Cancer Prevention Program Team by hosting one face-to-face and two online workshops to help reach every region in our state with Cervical Cancer Prevention information. The program has provided Aboriginal Health Professionals and clinicians who work with Aboriginal clients with deeper knowledge and increased confidence to raise Cervical Screen Testing with their clients. The sessions had 46 attendees, who reported improved knowledge and confidence in this subject and provided great feedback.



Presenters from the WA Cervical Cancer Prevention Program join AHCWA's Bites, Boorloo, 2024

FEEDBACK FROM ATTENDEES:

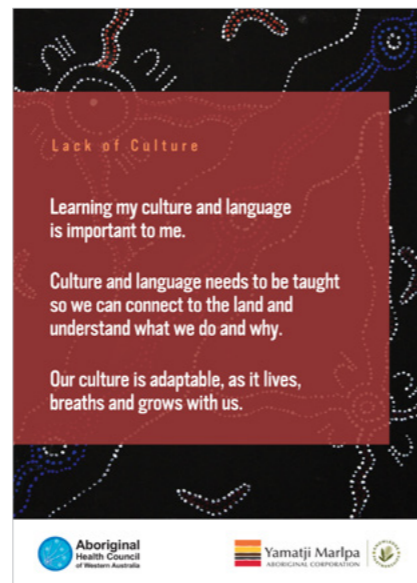
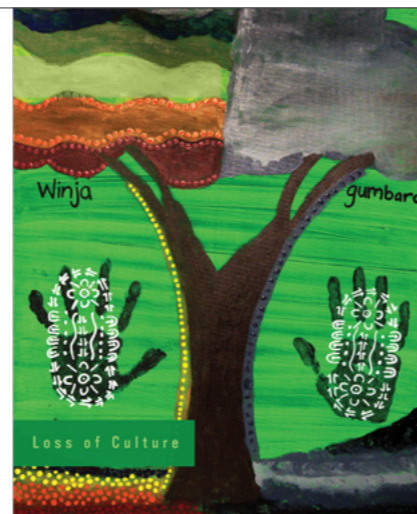
“I enjoyed the discussion from other participants and their experiences on the ground about cervical screening. Was interesting to learn about the meaning behind the artwork used on the resources as well.”

“Brilliant Resources! Great info and easy to understand.”

“Enjoyed the session, felt that it was comprehensive, and questions were answered well.”

Youth Engagement

AHCWA's Youth and Sexual Health Teams facilitated a number of reproductive health education sessions in the Perth metropolitan region at Girrawheen Senior High School and Gilmore College throughout the year. In Geraldton, Sexual Health Team youth facilitators worked alongside Yamatji Marlpa Aboriginal Corporation to deliver two workshops with local youth. From these sessions, 25 peer educators were trained and 18 trained peer educators were retained. These peer educators went on to create health promotion messaging and run activities in a follow-up YLP workshop. The young people also created social media videos and strengths-based posters for their community and undertook public speaking at events including Yamatji on Country attended by Elders and government Ministers, to youths at the AHCWA Youth State Sector Conference and to the ACCHS Sector at the NACCHO Youth Conference.



Health promotion developed by Youth peer educators

AHCWA and DoH Sexual Health Teams Workshop

In November 2023, AHCWA's Sexual Health Team delivered a two-day face-to-face workshop in partnership with WA DOH SHBBVP in Perth. This workshop brought together 63 staff working in sexual health from metropolitan, regional, and remote areas of Western Australia. Participants comprised of representatives from the ACCHS, WACHS and other non-government agencies working in sexual health. Feedback received from participants was overwhelmingly positive, with good suggestions for future workshops, and plans in place to continue the collaboration.



AHCWA and the DOH's Sexual Health Teams workshop, Boorloo, 2023

Social and Emotional Wellbeing Program

Social and emotional wellbeing is the foundation of physical and mental health for Indigenous Australians. It is a holistic concept that encompasses the importance of connection to land, culture, spirituality, and ancestry, and how these affect the wellbeing of the individual and the community. AHCWA has been funded by the Mental Health Commission (MHC) to undertake a pilot project that highlights an ACCHS Social and Emotional Wellbeing Model of Service, created in consultation with AHCWA's Member Services. Over the past two years, AHCWA's SEWB Pilot program sites have made significant progress enhancing culturally appropriate responses to social and emotional wellbeing and mental health services within their regions. By providing an inclusive environment that respects and upholds cultural safety and community-led, placed-based service delivery, the teams are able to complement Western therapeutic practices with cultural therapies into their services.

The ACCHS Service Model four pillar approach has shown that our ACCHS are best-placed to deliver SEWB and mental health services for our communities and since June 2022, the five pilot sites have delivered the following:



2,500+ Approximately 2,557 people have attended some kind of mental health training and education session such as ASIST, Aboriginal Mental Health First Aid, safeTALK.

3,500+ Approximately 3,548 people and/or families had direct engagement with SEWB Team through health promotion activities.

2,100+ Approximately 2,181 individuals and/or families have received information, advocacy, and referral and case management centred on successful resolution of challenges to their SEWB.

900+ Approximately 941 assessments.

270+ 278 referrals to internal services.

130+ 137 referrals to external services have been delivered.

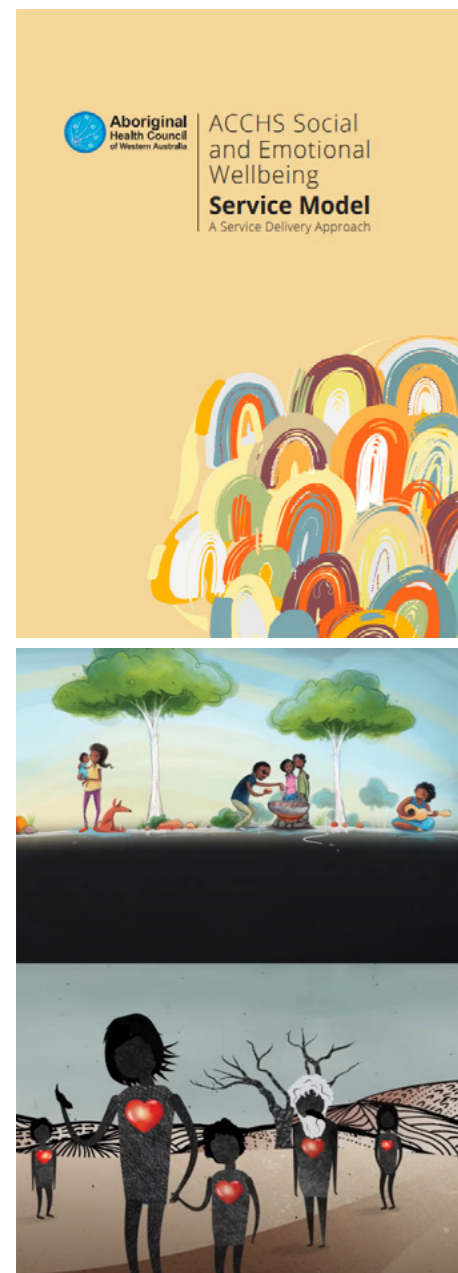
290+ 297 referrals from other services.

300+ 304 self-referrals.

70+ 72 group counselling sessions have been provided.

The pilot sites continue to strengthen the SEWB Service Model through the development of the ACCHS Social and Emotional Wellbeing Service Model. This service delivery approach addresses psychosocial tool gaps to help assess clients, and provides specific operational guides for sites to embed a streamlined approach to delivering an effective SEWB service adhering to the service model approach. It also offers person-centered planning guides, a SEWB-specific brief intervention guide and baseline essential training for new SEWB staff.

Figure 2: ACCHS Social and Emotional Wellbeing Service Model service delivery approach



Family, Domestic, and Sexual Violence Pilot Program

The Family, Domestic, and Sexual Violence (FDSV) Pilot Programs, which have been running in six ACCHS since the start of 2023, have been going from strength to strength during this period. AHCWA and the ACC sector have been advocating for many years for the need for Aboriginal community control over programs aimed at preventing, addressing, and healing from the effects of violence in our communities. The incredible stories coming from the communities in which these pilot programs are based are a testament to the significant positive impacts of these community-governed and culturally informed programs. The FDSV Pilot Programs run alongside SEWB programs in Derbarl Yerrigan Health Service (DYHS), South West Aboriginal Medical Service (SWAMS), Puntukurnu Aboriginal Medical Service (PAMS), Broome Regional Aboriginal Medical Service (BRAMS), Ngangganawili Aboriginal Health Service (NAHS), and Yura Yungi Aboriginal Medical Service (YYAMS). In January 2024, AHCWA filled the position of FDSV Project Advisor, a part-time position focussed on supporting the work of teams at the pilot sites.

This pilot program has supported ACCHS to play a leading role in acknowledging and responding to violence in their communities. One of the strengths of these programs operating within ACCHS is that this has supported the development of place-based programs at each site, designed by community, for community, in response to the particular strengths, challenges, health service, and community needs of each location. There are variations in the programs across each site, but the goals of the work are shared. One common objective has been raising awareness of the harmful impacts of FDSV in their communities. In the larger communities and services, pilot program staff have engaged in impactful work supporting

awareness raising and education within their ACCHS and throughout their local service sectors. In the smaller communities, pilot program staff have worked alongside community Elders to significantly and positively shift whole-of-community narratives of violence, raising awareness, and strengthening responses to support safety within the community.

In June 2023, the sites were working with 167 clients and by December 2023, this number had grown to 497 clients

Engagement within communities has grown throughout the course of the pilot programs. In June 2023, the sites were working with 167 clients and by December 2023, this number had grown to 497 clients. Embedding FDSV programs within ACCHS supports holistic and culturally informed approaches, which are integral to the effectiveness of these programs.

In May 2024, representatives from the FDSV pilot programs from YYAMS and NAHS presented an overview of their programs and program outcomes at AHCWA's Aboriginal Community Controlled State Sector Conference. In August, AHCWA's SEWB Manager and FDSV Project Advisor, together with representatives from NAHS and a community Elder, presented on the FDSV pilot programs and the development of this service in Wiluna at the Rural Health West Aboriginal Health Conference 2024. Both presentations garnered significant interest and positive feedback. Feedback highlighted how hearing about the work of these teams and the positive impacts they are having in their communities stirred hope that these complicated and devastating issues can shift in communities, and that there are ways of preventing violence.

Culture Care Connect Program

NACCHO has been funded by the federal Department of Health to nationally coordinate a first of its kind Culture Care Connect Program until 30 June 2025. The funding supports the establishment of up to 31 community controlled suicide prevention networks and community controlled aftercare services in each network region. As part of the program, jurisdictional suicide prevention initiatives are planned and coordinated within affiliates, and community controlled suicide prevention training, including Aboriginal and Torres Strait Islander Mental Health First Aid, is facilitated.

The Culture Care Connect program brings together key streams of suicide prevention planning, coordination, and activity across the network regions, including raising awareness, early intervention, crisis management, and aftercare services. Community Controlled Suicide Prevention Networks (CCSPN) will be established across the country and aftercare services will be delivered by ACCHOs participating in a CCSPN, in partnership with existing regional mental health services.

AHCWA's Culture Care Connect program is working to deliver jurisdictional suicide prevention coordination by undertaking service mapping, and developing relationships and a jurisdictional suicide prevention plan to ensure alignment with state and national priorities, and outline systemic or other changes to address barriers and opportunities across the state. The program also delivers Aboriginal and Torres Strait Islander Mental Health First Aid training to the workforces participating in Suicide Prevention Networks.

The key outcomes of the Culture Care Connect program are:

1. **Safety Systems** – ensuring, to the best of our ability, that systems drive the best outcomes for strong social and emotional wellbeing.
2. **Strong Workforce** – providing the program workforce with the skills and supports they need to be effective in this space.
3. **Aftercare Services** – each ACCHO within CCSPNs will be resourced to co-design and deliver trauma-aware, healing-informed aftercare services
4. **Monitor and Evaluate** – all program components will be monitored and evaluated for continuous quality improvement. AHCWA and ACCHOs to ensure monitoring and evaluation is as helpful as possible, with limited burden.

The approach to program design includes:

- increasing workforce and sector capability and capacity through resourcing and supports.
- empowering communities and our community-controlled sector to plan and coordinate suicide prevention services.
- creating a shared language for how our communities describe suicide prevention activities delivered by Aboriginal people for Aboriginal people that can be reflected in our ongoing advocacy.
- promoting social and emotional wellbeing by focussing on the cultural determinants of health that keep our people strong and resilient.
- reducing the stigma of suicide and ill mental health in our communities and services.

Inaugural WA Culture Care Connect Gathering

The Culture Care Connect teams from KAMS, PAHA, Moorditj Koort, DYHS, and Bega Garnbirringu Health Services convened in March 2024 at the AHCWA office for the inaugural Western Australian Culture Care Connect Gathering. Over three days, the Culture Care Connect Network Coordinators explored ways in which the regions could contribute to the development of the Western Australian Jurisdictional Suicide Prevention Plan. Each Culture Care Connect site shared insights into the development of their respective models of care, exchanging knowledge, highlighting successes, and addressing challenges. The Community Liaison Officers and Culture Care Connect teams were joined by Social and Emotional Wellbeing and Family and Domestic Violence teams from SWAMS and YYMS for Indigenous Applied Suicide Intervention Skills Training (I-ASIST). I-ASIST training enabled participants to learn skills that are crucial for fostering suicide-safer communities across the state.

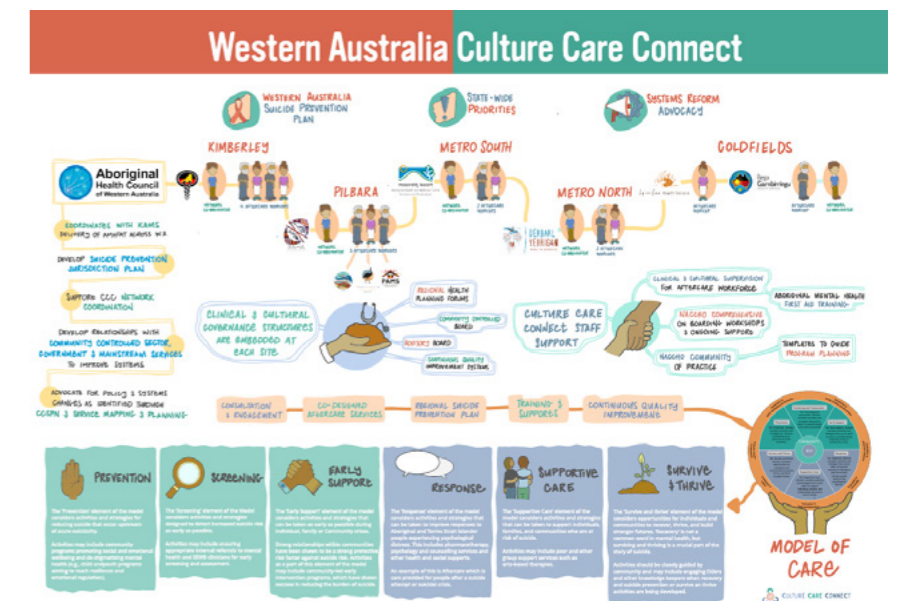


Figure 3: WA Culture Care Connect graphic recording

Workforce and Sector Development

The Workforce and Sector Development Work Group consists of several programs that work closely with the AHCWA Member Services, government, and non-government organisations and our National peak body, the National Aboriginal Community Controlled Health Organisation. The programs provide advocacy, leadership, and guidance and facilitate forums to support the Sector. Many of the programs also strive to build the workforce and health capacity of Aboriginal and non-Aboriginal people through various training courses, both accredited and non-accredited, through the AHCWA Registered Training Organisation—the Training and Development Centre.

NDIS Business Solutions

ACCCHS across Western Australia are committed to providing a holistic Model of Care that expands on the primary health care services they predominantly deliver in their communities. Disability services, including NDIS programs, remain of importance and priority to the Sector. AHCWA's NDIS Business Solutions Program, funded by the Western Australian Department of Communities as part of the sector transition funding, supported WA ACCCHS in delivering NDIS or exploring the opportunities to deliver NDIS services as a registered provider. The program concluded in June 2024.

As part of initiatives to market the program, AHCWA produced a range of tailored resources for ACCCHS to use in delivering NDIS services, block-funded disability programs, and other services available at local AMS for people with disabilities.

The resources included a suite of social media tiles, a marketing guide and framework for Western Australian ACCCHS, four brochures, and an organisational journey video, all-available on the AHCWA website. The resources were created to empower participant choice and control, as well as service delivery demands in regional and remote Western Australia and through online modules.

During the 2023–2024 year, AHCWA facilitated six Support Coordination Community of Practice meetings and Support Coordination two-day in-person training sessions in Perth, Bunbury, and Broome.

During the period, one NDIS mock audit was delivered, and further support on adapting and implementing NDIS-specific policies and processes was offered to AHCWA Member Services.

The WA ACCCHS Corporate Services Forum—NDIS Business Solutions, was hosted in Perth in June 2024. More than nine AHCWA Member Services and 23 staff attended the forum, which featured keynotes on NDIS and Aged Care compliance, Governance, disability-specific HR principles, and NDIS success stories.

AHCWA developed tailored NDIS resources

The collage features four distinct resource tiles with a consistent blue and white color scheme and decorative circular patterns. The top-left tile is a table titled 'WA ACCCHS NDIS Marketing Framework'. The top-right tile is a large graphic for the 'AHCWA NDIS Business Solutions Program Marketing Project - Implementation Guide'. The bottom-left tile is for 'Aged Care Programs Information and Support Services'. The bottom-right tile is for 'NDIS Support and Services Everyday Support (core)'.

Framework Principle	Description	Completes for your own Organisation (examples)
What are your short and long-term marketing goals?	<ul style="list-style-type: none"> What do you hope to accomplish? How do you plan to do it? When do you expect to achieve it? Consider resource factors such as time, money, and people involved. 	<ul style="list-style-type: none"> Short-term goal: To build awareness of disability and aged care services you offer. Long-term goal: To deliver a range of NDIS services as needed for the community's sustainability.
Who is your target audience/ market?	<ul style="list-style-type: none"> Target markets are made up of decision-makers and influencers. Buyers are your decision-makers. Influencers influence decision-makers. 	<ul style="list-style-type: none"> Buyers: For example, NDIS participants, aged care clients, or others seeking the services. Influencers: Influencers can be support workers or close, including both formal and informal. Family, friends, clinicians and welfare support staff.
What are your most appropriate marketing tools?	<ul style="list-style-type: none"> Marketing tools should be most appropriately suited to your organisation and community. Content distribution channels should be selected based on your target audience and goals. Not all marketing channels are appropriate to connect with your target audience. Identify and promote the most impactful marketing channels to connect with website, email, and foster relationships with your customers. 	<ul style="list-style-type: none"> Your marketing channels can be: Facebook, Instagram, LinkedIn, and YouTube or Google to find services. Word of mouth or interviews on local radio stations, TV or YouTube channels. Localised activities: barbeques, cook-ups, sporting events, and dining occasions. Settings that facilitate community engagement: youth centres, community sporting centres, community notice boards, advertisements on bus stops or bins.
What is your call to action?	<ul style="list-style-type: none"> When someone consumes your content, know exactly where you want them to go. 	<ul style="list-style-type: none"> Content destinations could be: <ul style="list-style-type: none"> Website Sign-up pages or contact pages. These should incorporate strategic calls to action clearly and concisely.
Complete all the previous steps.	<ul style="list-style-type: none"> You have your long and short-term goals, target audience, distribution channels, and content types for channels, promotion methods, desired actions, and metrics. 	<ul style="list-style-type: none"> This may include an Instagram, Facebook or LinkedIn or video showcasing services offered by your organisation and how people can access them.
Make your template.	<ul style="list-style-type: none"> Use a table, a flow chart, or graphs, an interactive graphics, a story board that visually represents your marketing framework. 	<ul style="list-style-type: none"> Use sample framework template attached to guide you with the process. Other call to action include the OSC, Learner Handbook.
Execute.	<ul style="list-style-type: none"> Include your framework and resources in the organisational database and systems to ensure continuity of support. 	



The AHCWA Youth Program

The AHCWA Youth Program identifies, supports, and advocates for critical issues affecting Aboriginal youth in Western Australia. During the 2023–2024 year, the Youth Program hosted monthly Youth Committee meetings, where jurisdictional representatives from across the state gathered to identify, discuss, and escalate regional and statewide health, social services, and community matters.

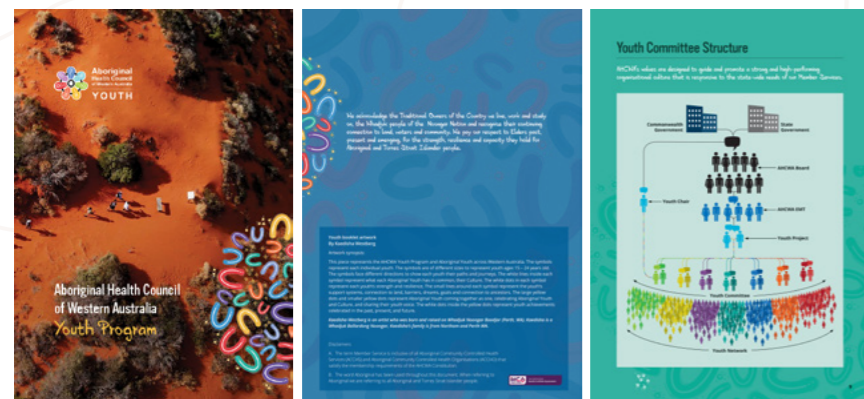
During 2023, the Youth Program was part of the Workforce and Sector Development Unit and supported facilitation of the Youth Committee meetings, ran social media campaigns on health topics and in-demand public health matters, and coordinated the AHCWA Youth Conference. More than 60 young people from across the state attended the 2024 AHCWA Youth Conference, which featured presentations on the theme “We are the change, breaking the barriers”. The Youth Conference held workshops on Youth Health Care topics including

sexual health, tackling Indigenous smoking, and social and emotional wellbeing, as well as preparing for the future and connecting with culture.

The Youth Committee met with Senator Malarndirri McCarthy, the Minister for Indigenous Australians, at the Conference, sharing the issues facing Aboriginal youth from across the state with her, and extending an opportunity to work in partnership with the state. Findings from the AHCWA Youth Conference were presented at the AHCWA State Sector Conference to the conference delegates for endorsement.

AHCWA released its Youth Program Booklet at the 2024 Youth Conference, outlining the program’s history and establishment. The booklet provided an overview of the Youth Committee’s structure, key activities, and achievements. It also welcomed Aboriginal youth across the state to engage with and be part of the AHCWA Youth Committee. A copy of this resource is accessible on the AHCWA website.

AHCWA’s 2024 Youth Program document



Indigenous Health Workforce Traineeships

The Indigenous Health Workforce Traineeships (IHWT) Program aims to build capacity and create viable career pathways for Aboriginal people working within the ACCHS Sector. In 2024, traineeships in Health and Community Services qualifications are accessible to ACCHS staff to help develop a skilled workforce able to meet growing sector demands.

The program supports 12 trainees employed across BRAMS, Ord Valley Aboriginal Health Service (OVAHS), DYHS, Moorditj Koort, and SWAMS.

AHCWA worked with three Registered Training Organisations; Marr Mooditj Training, KAMS, and AMA Training Services RTO, to support trainees in undertaking further education and training.

During the 2023–2024 year, the program supported one trainee through to graduation, with the remaining trainees due for completion at the end of the 2024 year. Six trainees undertook a Certificate III in Health Administration training and eight undertook a Certificate IV in Mental Health. The IHWT program is currently funded till the end of 2024, with the possibility of an extension.

12 trainees employed across BRAMS, Ord Valley Aboriginal Health Service (OVAHS), DYHS, Moorditj Koort, and SWAMS

01 trainee supported through to graduation

06 trainees undertook a Certificate III in Health Administration training

08 trainees undertook a Certificate IV in Mental Health

Home Care Workforce Program

During the 2023–2024 year, the Home Care Workforce Program, funded by NACCHO, made significant strides in strengthening the aging sector workforce across remote and very remote regions. By partnering with First Nations trainers and Registered Training Organisations, the program ensured that all training was culturally appropriate, honouring the traditional customs of Aboriginal communities.

During the year, the program facilitated fully-funded training sessions through AHCWA in the Goldfields and Gascoyne regions of Western Australia. These sessions offered jobseekers and current staff opportunities to upskill, refresh their knowledge of the sector, and benefit from ongoing support provided by a dedicated First Nations mentor. This support has been crucial in helping participants secure permanent employment within the aged care sector.

In addition to its training programs, AHCWA hosted aging and disability expos in the regions, bringing together representatives from ACCHOs and mainstream care provider services. These expos fostered networking opportunities amongst providers and expanded candidates’ employment opportunities and educational prospects. The events effectively promoted the program, further embedding its value in the community.

AHCWA, in collaboration with Marr Mooditj Training Aboriginal Corporation, delivered community support skillsets to eight community members in the Goldfields region.

AHCWA worked in partnership with training providers to facilitate the Aboriginal Mental Health First Aid Training to 11 community members in the Midwest and Gascoyne regions. Both trainings equipped staff and community members with skills and knowledge required by their roles and to service the demand of a growing care and support sector.

The funding for this program ceased on the 30 June 2024.



Elder Care Support Program

The Elder Care Support Program (the Program), funded by NACCHO, plays a pivotal role in assisting Elders and older Aboriginal people and their families, to navigate and access aged care services. This initiative is designed to enhance workforce capability and capacity within the Aboriginal community controlled aged care, empowering the Sector to coordinate place-based care that is both culturally appropriate and effective.

During this reporting period, AHCWA took significant steps to support this mission by providing comprehensive, wrap-around services to ACCHO staff. This included direct support through training, onboarding, jurisdictional advocacy, and developing contextualised communications and resources.

AHCWA trained 20 staff members from three ACCHOs using a non-accredited, culturally-tailored training suite developed by NACCHO in collaboration with Coolamon Advisors and through consultation with affiliate staff across Australia. Delivered over four days, this training covered critical areas such as:

- navigating My Aged Care, including agent responsibilities within the portal.
- differentiating between NDIS and Aged Care services.

- understanding the types of aged care services available.
- quality and safety standards in aged care.
- cultural self-care practices for staff and families.
- palliative care and ‘sorry business’.
- the role of healing in trauma-informed care.
- advocacy and the role of peak bodies.
- various access pathways and eligibility criteria for aged care.
- pre-planning support for aged care assessments.
- aged care system policies, processes, standards, rights, and responsibilities.
- achieving informed consent and managing conflicts of interest.

This training is crucial for Program staff, providing them with the foundational knowledge to navigate the aged care system effectively and utilise the My Aged Care portal appropriately.

In addition to training, AHCWA provided extensive support to Program staff through online reporting tools, local resources, branding, and toolkits. These resources are designed to help ACCHS staff and the broader community to better understand the Elder Care Support Program and the comprehensive support available to them through participating affiliates.

AHCWA, in collaboration with Marr Mooditj Training Aboriginal Corporation, delivered community support skillsets to eight community members in the Goldfields region

Ear Health Training Program

AHCWA's NACCHO and Commonwealth Department of Health and Aged Care funded Ear Health Coordination Program works to build ACCHS capacity and contribute to improved mainstream health sector awareness about culturally competent responses to ear and hearing health. AHCWA would like to acknowledge the strong collaboration of key stakeholders in government and non-government agencies that has supported our ear health initiatives, workforce development, ear health prevention, and advocacy work during the 2023–2024 year. These partnerships have helped us expand knowledge and understanding of hearing health issues, promote ear screening practices, and initiate change in communities across the state.

The Ear Health Team work in close collaboration with Rural Health West and partnered over the 2023–2024 year on the annual needs analysis, NACCHO Ear Health Coordination meetings, facilitation of outreach specialist support to our Member Services, and on promoting the Otitis Media Guidelines to the Sector. The Team provided annual one-day Ear Health Training sessions to Member Service staff across the regions who required a refresher in ear health screening techniques for children and youth. As in previous years, the Team facilitated the WA ACCHS Ear Health Forum (Community of Practice) which has been established since 2020, and met bi-monthly online and at two face-to-face meetings throughout the year.

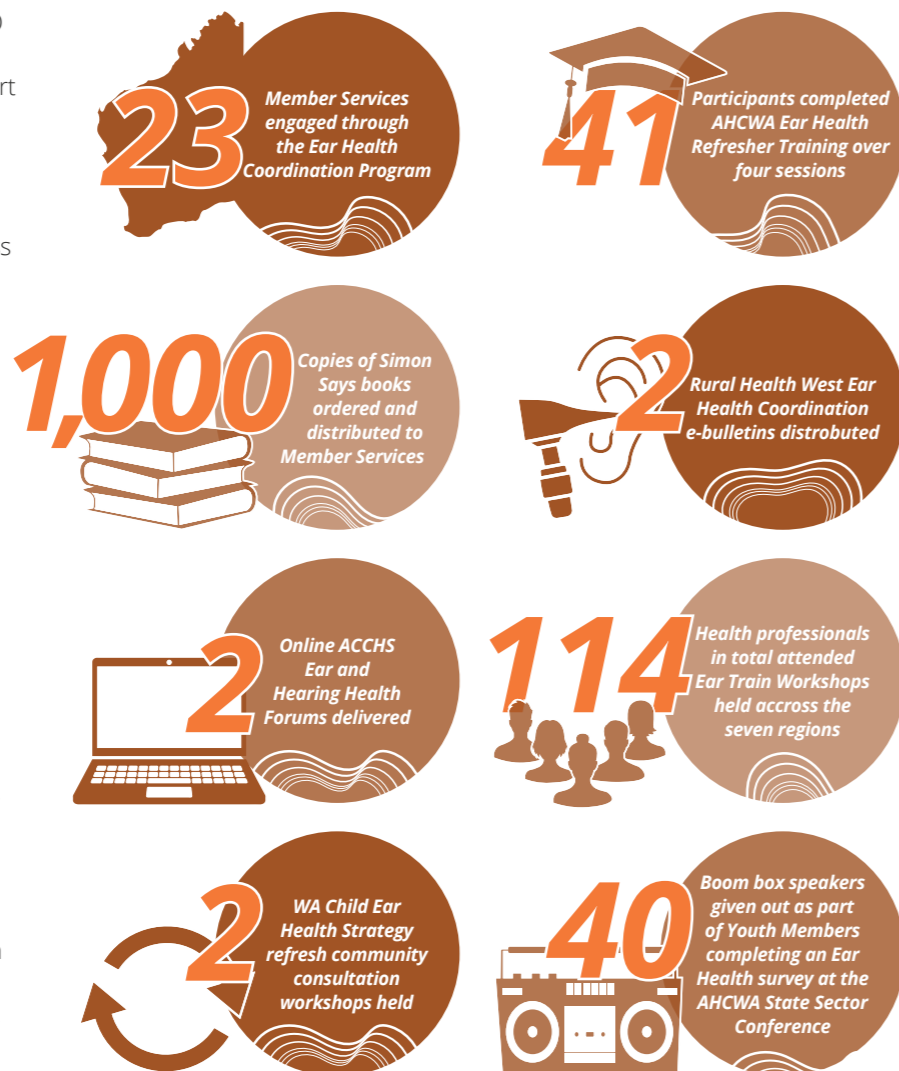
AHCWA were thrilled to partner this year with TAFE NSW to provide their EarTrain program to the Sector in Western Australia. EarTrain is a fully-funded online training program for primary health care professionals on the identification and management of otitis media and other hearing conditions in Aboriginal communities. Over two weeks during February–March 2024 the Ear Health Program Coordinator travelled across the seven regions with the EarTrain Team to provide one-day workshops to ACCHS, government, and non-government

organisations. The training aimed to upskill in using equipment specialised to screen and detect ear and hearing issues for babies aged 0–6 months.

The Ear Health Program produced the fifth edition of its Simon Says Series (Volume 5) resource, an engaging, illustrated comic-style booklet series casting a spotlight on different ear health topics, which is designed to support ear care in communities. AHCWA also launched its Geraldton Regional Aboriginal Medical Service Your Journey in Ear Health short film and booklet to the Gascoyne and Murchison region and communities in Geraldton in November 2023. The Your Journey in Ear Health series is a booklet and film series tailored to participating Member Services regions which aims to demystify the ear screening process and promote familiarity community uptake of ear screens.

In partnership with Rural Health West, AHCWA's Ear Health Team hosted the ACCHS Ear Health forum in November 2023 and the fourth WA Ear and Hearing Health Forum in August 2024. The Forums were well received and offered an opportunity for the Team to highlight success stories from the Ear Health Program across the sector.

The Ear Health Team has worked in collaboration with AHCWA's Public Health Medical Officer and NACCHO over a number of years to develop new Ear Health KPIs, and is pleased to announce these were piloted in June 2024. The ear check model has been incorporated in the client information systems that will be collated in the Health Data Portal moving forward. These will continue to be discussed in the ACCHS Ear Health and Clinical Leadership Gathering (CLG) forums going forward.



Western Australian Aboriginal Health Ethics Committee

The Western Australian Aboriginal Health Ethics Committee (WAAHEC) is one of only three Aboriginal-specific Human Research Ethics Committees (HRECs) in Australia. Recognised and registered by the National Health and Medical Research Council (NHMRC), WAAHEC is committed to upholding ethical standards in Aboriginal health research across Western Australia. Our mission is to support research that is beneficial to Aboriginal communities, reflective of their needs, and culturally appropriate.

Throughout the year, WAAHEC has actively promoted the inclusion of Aboriginal people in all aspects of research, ensuring their involvement as Chief and Associate Investigators.

WAAHEC held 10 meetings during the 2023–2024 period including the AHCWA Members Forum 2024, where the WAAHEC team presented on research and engagement for Aboriginal health in Western Australia. This presentation focused on research agreements and Member Services' engagement with researchers to drive their own research priorities.

In August, the Human Research Ethics Officer attended the Kimberley Aboriginal Health Research Alliance (KAHRA) Forum in Kununurra, and presented on research projects within the Kimberley region, as well as presenting the WAAHEC view for research and ethics on a panel discussion on Aboriginal control in Kimberley research and beyond with Vicki O'Donnell, Peter Miller, Mick Gooda, and Mr. Hill.

SUBMISSIONS OVERVIEW (2023–2024)	2021/22	2022/23	2023/24
Applications	95	86	81
Amendments	212	234	295
Responses	66	57	76
Progress Report	87	221	233
Final Report	21	18	64
Publication	49	25	15
Adverse Event	0	3	3
Complaint	0	0	0
Total	530	644	767



The diagram above represents the six core values of research as outlined by the NHMRC: Spirit and Integrity, Responsibility, Reciprocity, Respect, Cultural Continuity, and Equity. These values are fundamental to WAAHEC's approach to overseeing ethical research involving Aboriginal and Torres Strait Islander communities (Guidelines for Researchers and Stakeholders, 2018).

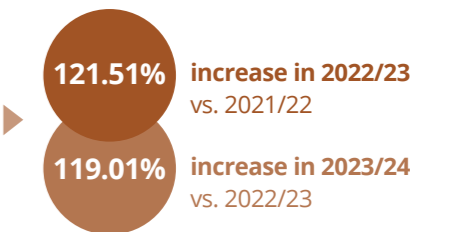
WAAHEC COMMITTEE MEMBERS			
NAME	POSITION	NAME	POSITION
Vicki O'Donnell	Chairperson	Deb Woods	Regional Professional
Chris Bin Kali	Elder/Deputy Chairperson	June Councillor	Regional Professional
Daniel Vujcich	Representative with Legal Training	Jye Walker	Community Member
Lynette Mallard	Health Professional	Sandra Moore	Community Member
Michael Wright	Researcher	Katiska Davis	Youth
Dan McAullay	Researcher		

The WAAHEC Secretariat continued to provide summaries of approved projects on the AHCWA website for public access, allowing communities to view and monitor ongoing research projects in their regions.

Despite the positive progress, WAAHEC has identified instances where research in Western Australia was conducted without the necessary approval from WAAHEC. Through considerable collaboration with responsible institutions, AHCWA has worked to improve researchers' understanding of the approval process.

Due to WAAHEC's firm governance, 96 per cent of all current projects now include an Aboriginal and/or Torres Strait Islander investigator, ensuring the research is engaging and aligned with community values and perspectives. This is the first year that WAAHEC has fully accomplished the minimum membership categories (National Statement 5.1.30), including the participation of Youth members in building capacity and development.

The strength and effectiveness of the WAAHEC program draws on diverse expertise and deep cultural knowledge of its committee members. Each committee member brings a unique perspective and a solid commitment to upholding the ethical standards required for research involving Aboriginal and Torres Strait Islander communities.



Family Wellbeing

AHCWA's Family Wellbeing Program has delivered an accredited 10272NAT Certificate II in Family Wellbeing course since 2018, funded by the Western Australian Mental Health Commission under the WA Suicide Prevention Framework 2021–2025. In March 2021, the course expired.

The Family Wellbeing Program Team provided training as part of its Teach Out mode from April to December 2021, and prepared to support the Batchelor Institute (previously owned by TAFESA) in updating the material and the necessary documentation to undergo the reaccreditation process through the Australian Skills Quality Authority (ASQA).

The Family Wellbeing Program has been on hold with the MHC since late 2022, which included the July to October 2023 period.

The Program has consisted of two positions:

- Family Wellbeing Program Coordinator (50D); and
- Family Wellbeing Program Officer.

Whilst AHCWA have been waiting for ASQA to reaccredit the qualification, the Mental Health Commission has supported the organisation to deliver tailored workshops to eight Western Australian regions using content from the existing Certificate II in Family Wellbeing course.

The project brings together Aboriginal health professionals and others who work with Aboriginal people and share skills to support individuals, families, and communities in overcoming social and emotional challenges and creating stronger communities and family environments.

The Team started discussions with the Member Services and key staff across the regions, with two workshops held in the metropolitan area: one male specific and one female specific, inviting staff from Derbarl Yerrigan, Moorditj Koort, and SWAMS.

After the engagement and consultation process with some regions, it was

decided that the course content had become outdated since its original development. The social emotional wellbeing and mental health support space, including family and domestic violence, had advanced a great deal since 2018. There were many training providers visiting the regions, as well as established programs in place in the Member Services. AHCWA determined it would be best not to deliver the non-accredited workshops and the program ceased as of 30 June 2024.

AHCWA currently provides support to the Member Services in our area of suicide prevention and family and domestic violence, as well as the Social-Emotional Wellbeing pilot sites through the PHCQI Work Group.

Mappa

Mappa is an online platform which seeks to improve access to health services as close as possible to family, home, and Country for Aboriginal and non-Aboriginal people. Mappa's consultation, design, and development have been driven by cultural considerations and made possible through collaboration with the Western Australian health sector. Mappa uses spatial mapping technology to chart the location of primary, secondary, and tertiary health care services, alcohol, and other drugs services, visiting specialists, outreach clinics, and mental health and social and emotional wellbeing facilities in regional and remote Western Australia.

The Platform works to help Aboriginal and non-Aboriginal people, health service providers clinicians, GPs, Allied Health, and health professionals to better-access health service as close as possible to family, home, and Country. The platform supports the Sustainable Health Review's Recommendation 12: *Improve coordination and access for Country patients by establishing formal links between regions and metropolitan health service providers for elective services including outpatients and telehealth, patient transfers, clinical support, and education and training.*

During 2023, AHCWA concentrated on ensuring the data and information on

AHCWA currently provides support to the Member Services in our area of suicide prevention and family and domestic violence, as well as the Social-Emotional Wellbeing pilot sites through the PHCQI Work Group

the Mappa Platform was current and accurate, employing a Clinical Advisor and Data Information Management Officer to support the Technical Lead. The team concentrated on contacting the ACCHS, the WA Country Health Service, and Health Service Providers to review each key partner information to personalize and update the information from services provided to key cultural information. The review created an opportunity to assess Mappa's front facing structure to ensure Mappa was a user-friendly, searchable tool, which was easy to navigate, and which enabled users to find the information they were seeking, whether they were a health professional or a community member.

AHCWA does not generate revenue from the Mappa platform. All funds used to develop the Platform have been received through grants and in December 2023, external funding sources for Mappa ceased. The AHCWA Board of Directors endorsed supporting the Mappa Platform until 30 June 2024, to ensure Mappa reached a stage where the data and information correctly represented the key partners and stakeholders. As of July 2024, AHCWA is required to place the Mappa platform on hold due to the inability to access further funding to support its continued update and maintenance. AHCWA is seeking further funding to support this maintenance.

Corporate Services

AHCWA's Corporate Services Work Unit aspires to grow and advance the capacity and capability of AHCWA and our Member Services for long term sustainability. It seeks to strengthen our Sector to undertake business and workforce planning and development to improve resilience and sustainability. It also builds the capacity of Community Members to contribute to the strategic direction of ACCHS and the succession plan for the future. It is responsible for implementing robust processes and systems that ensure AHCWA's continued operational effectiveness and accountability to Member Services.

People and Culture

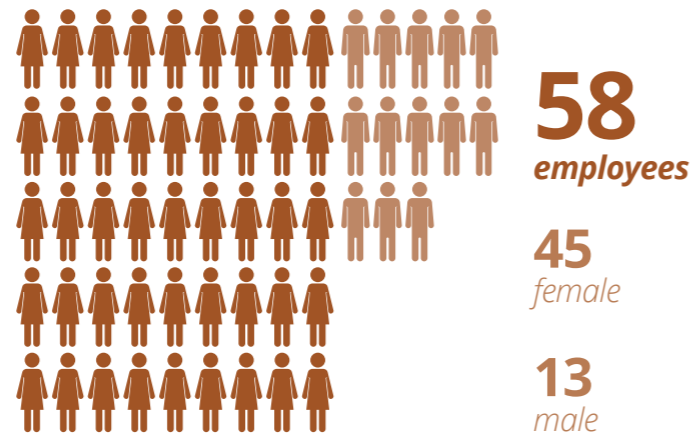
AHCWA's People and Culture team works to advance the organisation's strategic workforce planning through talent management, recruitment, training and development, team building, and employee relations. Our mission is to enhance the overall operational efficiency of the organisation and provide robust support to our workforce and Member Services.

Throughout the 2023–2024 year, the People and Culture Team continued to address the unique workforce challenges experienced by the ACCHS Sector, offering tailored human resource management support and advice on key workforce matters including recruitment, job design, workforce planning, training, work health and safety, and industrial relations.

During the reporting period, the People and Culture team:

- delivered 78 instances of tailored support across recruitment and selection, job design, performance management, workforce planning, compliance, industrial relations, work health and safety, remuneration, award interpretation, contracts, and payroll.
- disseminated three critical workforce planning tools including the Workforce Capability Planning Tool, Skills Matrix, Job Descriptions, KPI Agreements, work plans, organisational charts, and succession planning frameworks.
- offered nine professional development opportunities to Member Service employees and Board members to enhance workforce capacity and capability.

OUR PEOPLE AT 30 JUNE 2024



Continuing Professional Development

The team focused on building and maintaining a **learning culture, building talent from within, and promoting career development opportunities.**



127
episodes of training and development



- 78** instances of tailored support
- 03** critical workforce planning tools
- 09** professional development opportunities delivered

Aboriginal Workforce Engagement and Development Strategy

The Aboriginal Workforce Engagement and Development Strategy 2023–2027 supports AHCWA's mission to build a sustainable, skilled, and knowledgeable workforce by increasing and retaining Aboriginal employees. Aligned to the previous Reconciliation Action Plan, the strategy promotes a culturally safe environment and professional development opportunities.

The Strategy has four key focus areas: attract and retain skilled Aboriginal professionals; strengthen community ties and collaboration; foster an inclusive and respectful work environment; and provide mentorship and career growth opportunities.

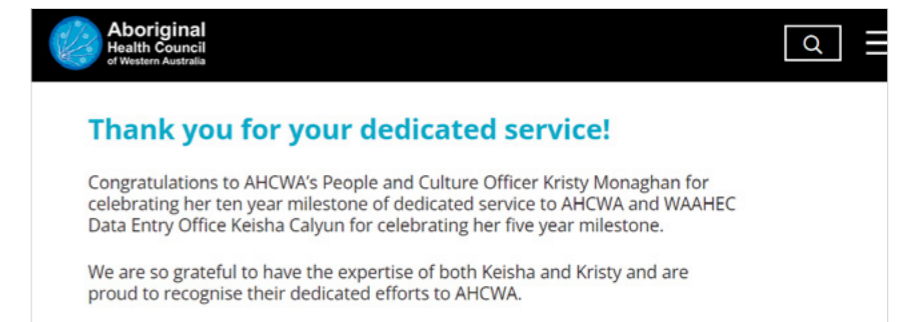
The 2023 Employee Satisfaction Survey yielded highly positive results, reflecting our commitment to creating a supportive and engaging work environment.

- the survey showed an impressive overall satisfaction level, with 75 per cent of respondents selecting

“strongly agree” or “agree” across all questions. This high level of satisfaction indicates that the majority of our employees have a positive outlook on their work experience at AHCWA.

- the general sentiment was consistently positive across various aspects of the survey, with two-thirds of the questions receiving satisfaction levels between 61 per cent and 89 per cent. This demonstrates a broad base of employee contentment and satisfaction.
- average satisfaction remains exceptionally high at 92 per cent, reflecting strong alignment with AHCWA's mission and purpose.
- two-thirds of respondents remain satisfied in the area of Communication and Support. The desire for more

- communication and support highlights opportunities for further improvement.
- with an 81 per cent average satisfaction level, a vast majority of staff understand their duties, feel fulfilled by their work, and have good relationships with peers. This area shows strong alignment with career goals and fair treatment by management.
- around 69 per cent of respondents view workplace flexibility positively, emphasising a generally favourable outlook on flexibility options.
- the survey revealed a positive cultural environment with a strong 75 per cent average satisfaction rate, with 90 per cent believing AHCWA is committed to workplace safety and psychological support.



Communications and Design

Strategic, clear, and effective communication is vital to meeting the growing need for information, advice, and guidance for AHCWA's Member Services and communities across a range of health issues. AHCWA's Communications and Design team work to support our Member Services through communications that are practical, accessible, culturally appropriate, timely, clear, and trustworthy. This work not only promotes the organisation and its programs, as the only Western Australian peak body in Aboriginal health; but also conveys and promotes primary health care messaging for our Member Services and seeks to influence the state and national Aboriginal health agenda as determined by our Member Services, in support of their work and sustainability.

Throughout the 2023–2024 year, AHCWA's Communications and Design Team supported work units across the organisation through the creation of compelling, culturally appropriate, and aesthetically pleasing communications responsive to the needs of our Member Services. Key among the team's achievements during the period were the provision of the following:

- a number of bespoke, culturally relevant artworks by Aboriginal artists created to present new AHCWA programs and high profile reports, including the Environmental Health Program and Eye Health Training Program, the redesign of the AHCWA Youth Program artwork, and the AHCWA Annual Report graphic.
- around 25 Media Releases and features promoting organisational milestones, programs, and events, as well as advocating on issues of importance to the organisation.



AHCWA's Eye Health Training Program artwork

AHCWA's Youth Program artwork

WA Aboriginal Community Controlled Health Sector Conference 2024 artwork

- a series of publications designed to support AHCWA initiatives and programs, responsive to the needs of our Member Services, including the 'Junior Goes to the Doctor' resource, the Aboriginal Workforce Engagement and Development Strategy, and the Climate Health Awareness toolkit. The team also designed, wrote, and produced key AHCWA publications including the Annual Report and KPI Report Card during the reporting period.
- a broad range of custom merchandise developed to promote the organisation's various training programs, sector support initiatives, and State Sector Conference.
- Development and launch of communications campaigns including the Ngalla Biddi bursary drive and the RSV immunisation drive to raise awareness around key AHCWA initiatives.
- development and distribution of 32 e-bulletins across AHCWA, Social and Emotional Wellbeing, and Public Health and Continuous Quality Improvement audiences; keeping key stakeholders and Member Services abreast of events, training, and significant news from across the organisation on an ongoing basis.
- a number of short films and training videos promoting AHCWA's initiatives, including the Vaccinations Across the Life Cycle animation and the Your Journey In Ear Health, and Aboriginal Mental Health First Aid Training videos.
- distributed a daily suite of purpose-developed social media posts across LinkedIn, Instagram, and Facebook, engaging and building audiences around AHCWA's initiatives, as well as a series of targeted digital resources designed around specific public health promotion initiatives, such as RSV, Pertussis, Shingrix, and JSV.

- 25 media releases and features**
- 32 e-bulletins** across AHCWA, SEWB, and PHCQI audiences
- a number of short films and training videos** promoting AHCWA's initiatives
- daily suite of purpose-developed social media posts** across LinkedIn, Instagram, and Facebook

AOD Certification Project

AHCWA's Alcohol and Other Drug (AOD) Certification Ready Project works to support ACCHS and ACCOs in progressing towards certification against the Alcohol and Other Drug and Human Services Standard (AODHSS). In doing so, the program, which partners with the Western Australian Network of Alcohol and other Drug Agencies (WANADA) seeks to increase our Member Services' capability to apply for AOD treatment funding, and ultimately enhance their capacity to respond to AOD concerns of local Aboriginal people, families, and communities.

A key activity enabling this progression has been participation in the Management Systems Auditing and Lead Auditor Training courses run by Gray Management Systems. During the 2023–2024 year, 24 trainees completed the two courses from across AHCWA's Member Services and key partner staff. This has achieved the secondary objective of the project, increasing the lead auditor workforce in the ACCHS sector. Outside the scope of the project, three of these trainees have chosen to progress and complete their Diploma of Quality Auditing.

The AOD project team has delivered support with service scoping tailored to community need, service capability, and strategic plans; along with AOD support planning, including client journey mapping, certification coaching, and implementation plans. By using the systems and evidence-based approach of the AODHSS certification, Services are sure to have an embedded and sustainable AOD response.

Recognising that there is a skilled workforce currently responding to individual AOD needs, the project is identifying opportunities to illustrate and highlight the work already being done by enhancing this with systems and processes. Self-supported templates and resources have been developed and tested practically, designed to be responsive to service capacity challenges, with guidance for Services on how to apply these to their Service.

Quality and Compliance

In April 2024, staff diligence and a culture of continuous improvement, AHCWA successfully reaccredited its Quality Management System under ISO 9001:2015, with no non-conformances identified. However, five recommendations were offered for further enhancement. The Quality and Compliance Officer will work closely with the Management Review Committee to implement the audit recommendations.

Additionally, the Logiqc Quality Management System has been upgraded to better support AHCWA in managing funding contracts, improving search functionality, reviewing documents, conducting internal audits, and driving continuous improvement efforts.

IMPROVEMENTS 2022/23 2023/24

20 **18** WHS

20 **25** Process*

01 **05** Building

06 **03** Audit non-conformances

*eight internal audit suggestions in 2022/23 vs. 19 in 2023/34

Information and Communications Technology

During the 2023–2024 year, the Information Communications and Technology (ICT) team focused on improving operational efficiency and effectiveness through cybersecurity initiatives, protection against malware and malicious attacks, HelpDesk ticketing, and asset management. Building on the organisation's existing cybersecurity awareness programs, the ICT team held regular training sessions, phishing exercises, and updates on best practices for maintaining secure digital environments throughout the year to ensure staff remained vigilant against potential threats. In 2023–2024, AHCWA's ICT Support Engineer further enhanced the organisation's defenses against malware and other malicious attacks by implementing the latest protection protocols, including advanced threat detection systems, regular software updates, and real-time monitoring to identify and mitigate potential risks swiftly.

The organisation's HelpDesk ticketing and asset management system has seen significant improvements during the course of the year. The updated system is now more efficient, allowing staff to easily track support requests and manage ICT assets. This has led to faster resolution times and better resource allocation across the organisation.

As we look toward the coming year, one of our primary goals is to update our backup storage system. This update will ensure that our data is not only securely stored but also easily retrievable in case of emergencies. Our focus will be on integrating more robust and scalable storage solutions to meet the growing demands of our organisation.

The AOD project team has delivered support with service scoping tailored to community need, service capability, and strategic plans; along with AOD support planning, including client journey mapping, certification coaching, and implementation plans

Financial Summary

AHCWA recorded a surplus of \$888K* for the 2023–2024 financial year, in comparison to a surplus \$1.95 million for 2022–2023 financial year.

	2024	2023
Surplus	\$888,668	\$1,946,670
Income	\$19,040,501	\$22,108,573
Expenses	\$18,151,833	\$20,161,903



Grant Funding: \$18,061,024
Other: \$979,477



Employee Expenses: \$6,684,213
Other: \$11,467,620

Total Assets: \$24,774,058

Total Liabilities: \$11,187,865

*Unaudited draft financials

NOTES



**Aboriginal
Health Council**
of Western Australia

450 Beaufort Street, Highgate WA 6003

Ph: (08) 9227 1631 | Fax: (08) 9228 1099

www.ahcwa.org.au  AHCWA   ahcwa_hq