

**SETTING**

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An Inner-city Hospital Establishes an Aboriginal Health Unit

Outreach is not the only way for hospitals to work with local Aboriginal and Torres Strait Islander communities. It is also critical to ensure that Indigenous people have a positive hospital experience and that cultural and other barriers to accessing hospitals are proactively addressed. This case study shows how one hospital is working towards this.

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Specialists. Together

Artwork credit: Zachary Bennett-Brook is the artist and owner of Saltwater Dreamtime. A Torres Strait Islander artist born and raised in Wollongong (Dharawal Country), he has a love for the ocean and creating contemporary artworks which represent his culture and passions. Bennett-Brook created an original artwork for the Royal Australasian College of Physicians to represent doctor-patient community engagement.

The red and orange concentric circles on the left symbolise the patient, their family and broader community contexts. The blue concentric circles on the right symbolise the doctor, the health service and the broader medical profession, college and university contexts. The green in the centre depicts the engagement space, where all these individual and contextual elements can connect to promote health and wellbeing. www.saltwaterdreamtime.com



SNAPSHOT Melbourne's Indigenous population

In 2016, Melbourne's Aboriginal and Torres Strait Islander population was just over 24,000 – about half of Victoria's Indigenous population – spread across suburban areas. For information about hospitals and specialists with and in Melbourne's Aboriginal Community Controlled Health Services in Melbourne – see the case study on the Victorian Aboriginal Health Service.

What's the problem with our hospitals?

Greater need – Aboriginal and Torres Strait Islander people's hospitalisation rates are higher than those of their non-Indigenous peers due to poorer health, including for potentially preventable admissions which might otherwise have been treated earlier in primary settings.

Barriers – Health authorities' complicity in the forcible removal of the Stolen Generations is a recent memory for many. Thus, Aboriginal and Torres Strait Islander people can have mistrust towards hospitals. Despite greater need, Aboriginal and Torres Strait Islander people are less likely to receive a medical or surgical procedure while in hospitalⁱ. In a national 2012–13 survey, 27 per cent of Indigenous people reported access barriers in relation to hospitals, be they distance, language, cultural or other barriersⁱⁱ. Between July 2011 and June 2013, the Australian Health Ministers' Advisory Council reported that 5 per cent of all hospitalised Aboriginal and Torres Strait Islander peoples left hospital against medical advice or were discharged at their own risk. This compares with 0.5 per cent for non-Indigenous people. It's critical that our hospitals proactively work to address this situation.



St Vincent's Hospital's Aboriginal Health Unit

St Vincent's is a large public hospital located in Fitzroy, Melbourne. It has more than 5000 staff and 880 beds. In 2016–17 St Vincent's treated approximately 57,000 acute inpatients; Aboriginal patient data showed 1235 inpatients, 935 emergency presentations and 2528 outpatientsⁱⁱⁱ. St Vincent's is part of the North Western Melbourne Primary Health Care Unit. Services include acute medical and surgical services, emergency care, aged care, diagnostics, rehabilitation, allied health, mental health, palliative care and residential care. It has a long history of working with its local Indigenous population and provides outreach to the Victorian Aboriginal Health Service (VAHS) – as discussed in another case study.

Aboriginal Hospital Liaison Officers (AHLOs) – St Vincent's AHLO Program was established in 1982. AHLOs provide support to patients and their families during admission, inpatient stays, and upon discharge. They provide a culturally sensitive link between medical teams and patients. AHLOs work with and educate other staff in being culturally sensitive to Indigenous patient needs. St Vincent's currently employs three AHLOs:

- One covers the Emergency Department, the Mental Health Unit's Aboriginal inpatient beds, and Cardiac Services including cardiac patients in the Intensive Care Unit as well as other inpatient and outpatient units and Dialysis.

- A second covers designated general and specialist inpatient and outpatient units, Oncology, Cancer Tumour streams and Palliative Care.
- A senior AHLO is responsible for partnerships and liaison with Aboriginal community organisations, and for staff orientation, cultural engagement and staff training,

St Vincent's established an Aboriginal and Torres Strait Islander staffed Aboriginal Health Unit under a dedicated manager at the end of 2015. This incorporated the existing AHLO Program. Further, at St Vincent's an Aboriginal Health Care Coordinator in the Assessment Liaison & Early Referral Team (ALERT) works with patients presenting with complex needs and assists them to manage their needs in the community by connecting them to GPs and other health services, by advocacy, and by supporting their attendance at outpatient appointments. Completing the Unit, an Aboriginal Employment Officer is responsible for the recruitment and support of Aboriginal staff at St Vincent's.

Working with prisoners – Aboriginal and Torres Strait Islander people are imprisoned at over 10 times the rate of other Australians. Working with Indigenous people in prison is critical to improving Indigenous health at a population level. The Unit provides services to Indigenous prisoners through a special ward located in the hospital. Unit staff liaise with the

Aboriginal Health Clinician at Port Phillip Prison about these patients.



The Aboriginal Health Unit's staff

The principles in action: What makes the Aboriginal Health Unit work?

Principles in Practice	Actions
Indigenous leadership	<ul style="list-style-type: none"> • The Aboriginal Health Unit was established in response to need identified by local Aboriginal and Torres Strait Islander communities and local Aboriginal Community Controlled Health Services (ACCHSs). • All staff are Aboriginal and Torres Strait Islander, including the Unit manager. • An Aboriginal Health Advisory Committee, includes representatives of local ACCHSs, community services, and staff and heads of hospital departments.
Culturally safe and equitable services	<ul style="list-style-type: none"> • AHLOs provide a culturally sensitive link between medical teams and patients. • The Senior AHLO educates other hospital staff on how to work in culturally sensitive ways. • The Unit's Aboriginal Employment Officer supports the hospital to actively recruit Indigenous staff. This includes an Aboriginal cadetship program for nursing and allied health staff in training. • The hospital hosts Aboriginal and Torres Strait Islander celebrations on site and all staff are encouraged to participate. This includes Close the Gap Day, Sorry Day, NAIDOC Week and Reconciliation Week.
Person-centred and family-orientated	<ul style="list-style-type: none"> • AHLOs provide an Indigenous person-centred hospital experience, involving families as appropriate. • The Unit and the hospital's Social Work Team have developed an Aboriginal & Torres Strait Islander Care Planning tool to assess patient health and other priorities and communicate complex care needs to key stakeholders. The tool is completed with the patient and used by the AHLOs and Social Work Team to help ensure a patient's needs are appropriately prioritised and holistically addressed in and out of hospital.

Sustainable and feasible

- Institutional culture – Aboriginal and Torres Strait Islander health is a core priority for St Vincent's Health Australia, the hospital's governing body. It has a Reconciliation Action Plan that drives Aboriginal health activities and includes Aboriginal employment targets.
- Funding – The Aboriginal Health Unit is primarily funded from core public hospital funding. St Vincent's Private Hospital Melbourne, as part of the organisation's Reconciliation Action Plan, funds one AHLO position, and the part-time Aboriginal health clinician at Port Phillip's correctional services is funded by the Victorian Department of Justice. The cadetship program is funded by the Victorian Department of Health.

Integration and continuity of care

- The Aboriginal Health Care Coordinator works with patients presenting with complex needs and assists them in managing their health needs within the community. They do this by connecting patients to GPs and other health services, by advocacy, and by supporting their attendance at outpatient appointments.
- See also the Aboriginal & Torres Strait Islander Care Planning tool above.

Quality and accountability

- The hospital collates data and regularly reports to the Aboriginal Health Advisory Committee on both Aboriginal and Torres Strait Islander staff numbers and patient presentations. Because the committee has Indigenous community representation, this expands the hospital's accountability to those communities.
- To proactively identify gaps, barriers and issues to address, AHLOs enter and analyse patient contact data at the end of each month, including data on discharges against medical advice and on patients who left without being seen.

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- Department of Prime Minister and Cabinet, Aboriginal and Torres Strait Islander Health Performance Framework 2014 Report, <https://www.pmc.gov.au/sites/default/files/publications/indigenous/Health-Performance-Framework-2014/tier-3-health-system-performance/306-access-hospital-procedures.html> accessed 12/11/17
 - Department of Prime Minister and Cabinet, Aboriginal and Torres Strait Islander Health Performance Framework 2014 Report <https://www.pmc.gov.au/sites/default/files/publications/indigenous/Health-Performance-Framework-2014/tier-3-health-system-performance/314-access-services-compared-need.html> accessed 12/11/17
 - St Vincent's Hospital Melbourne, Annual report 2016-2017 <https://www.svhm.org.au/ArticleDocuments/1407/SVHM-Annual-Report-2017.pdf.aspx?embed=y> accessed 25/01/17