Annual Report 2022

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We acknowledge and respect the traditional lands of all Aboriginal people, We respect all Elders past, present & future. We ask all those that walk, work & live on traditional Aboriginal lands to be respectful of culture & traditions and work together as one to better Aboriginal Health.

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About Us

Wellington Aboriginal Corporation Health Service (WACHS) is on the land of the Wiradjuri people.

WACHS is an Aboriginal Community Controlled Health Organisation which has been running for over 35 years, located in the town of Wellington. Wellington is a small rural community with a shire population of approximately 8,831 people of which 1,897 are Aboriginal (2016 Census Stats).

WACHS offers professional, holistic health care to enhance the health and emotional wellbeing of the Aboriginal and non-Aboriginal communities in Wellington and surrounding districts including Dubbo, Moree, North West and Far West Regions of NSW and Greater Western Sydney covering Mt Druitt, Penrith, Nepean and Blue Mountains.

Our services continue to expand with new programs, staff and clinics coming onboard and our expansive range of specialist programs provided by staff from WACHS or through partnership links with visiting services continues to grow providing our communities with the best possible health care options available.

WACHS is governed by a Board of Directors which consists of nine Aboriginal community members and one independant. These are elected annually by the Community. The Board of Directors provides the strategic direction of the organisation and works in close consultation with the Chief Executive Officer to ensure that organisational, community and funding outcomes are being achieved in line with our Strategic Plan.

WACHS employs 140 staff including Visiting Specialists across all service locations.

Our Mission

To increas population health outcomes through culturally appropriate services delivery; engaged leadership and community engagement that supports and advocates Aboriginal peoples' evolving notion of community and cultural wellbeing

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Our Vision

To be acknowledged and respected as a leader in the provision of primary health care which is demonstrated by healthier communities across all locations serviced by WACHS.

Our Purpose

To plan, deliver, co-ordinate and advocate for enhanced clinical and community-based primary health care services to the Aboriginal communities of which WACHS services.

Key priority areas

1. Deliver culturally appropriate primary health that is client centred to improve population health outcomes

2. Implement high quality widence based primary health care and population health programs that are measurable & financially sustainable

3. Improve population health outcomes through shared decision making and leadership in the sector

4. Lead business development models to transform and sustain through innovation

3 Year Aspirational Goal

Leader in primary health care and the business development of community controlled health services.

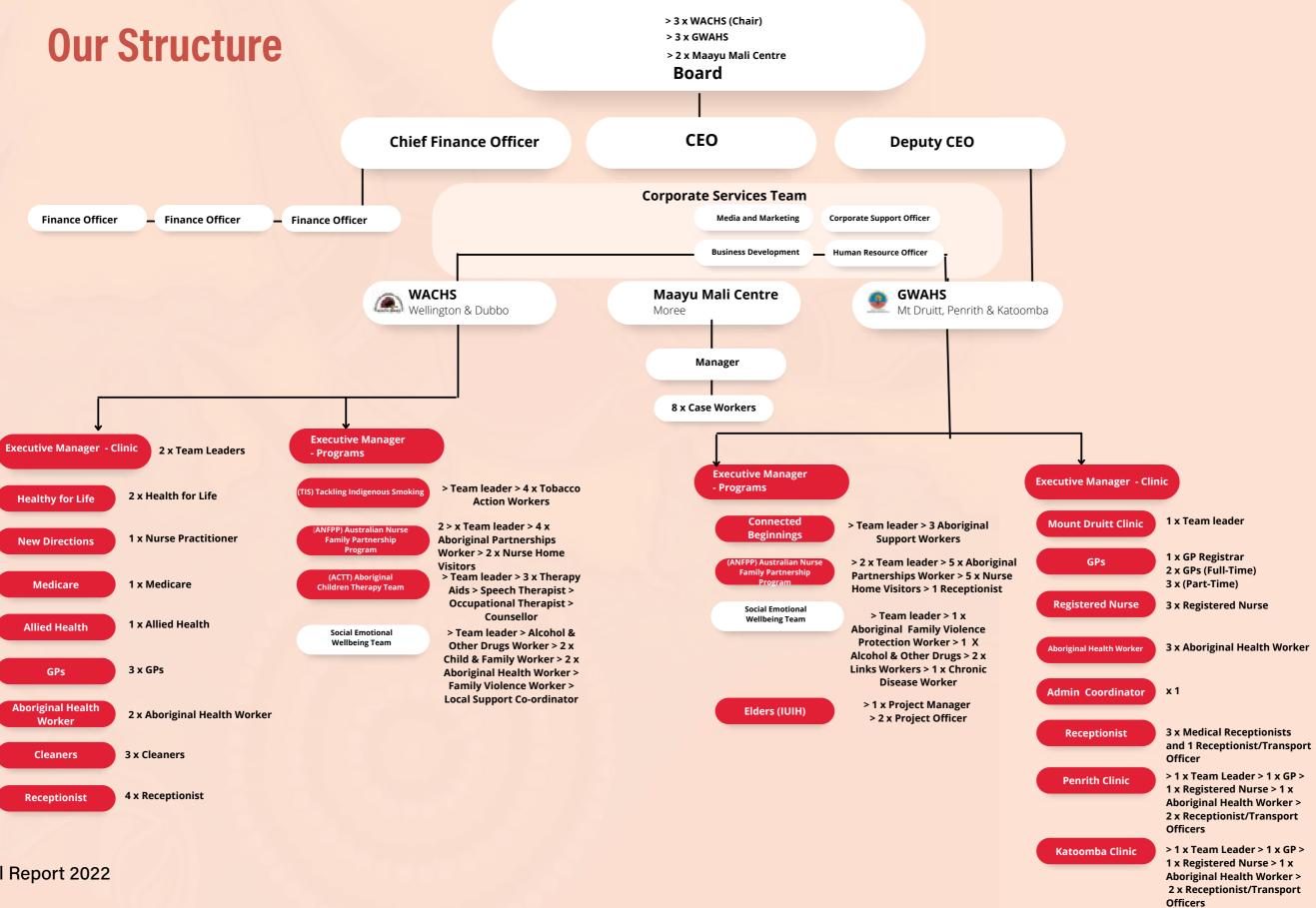
Our locations

Dubbo Wellington Katoomba Penrith **Mount Druitt**









> 1 x Team Leader > 1 x GP > 1 x Registered Nurse > 1 x Aboriginal Health Worker >

Our Board



Director Tony Hunter Western Sydney NSW



Deputy Chair Lizzie May Western Sydney NSW





Deputy Chair Glen Crump Moree NSW



Director Deanne Towney Wellington NSW



Director Denise Webb Moree NSW Independent: Steven Gal Western Sydney NSW



Director Terrieanne Hughes Western Sydney NSW

Vacant - to be determined through recruitment

Independent

Director Judy Duncan Moree NSW

Chair's Report

On behalf of the Board, I present to the communities of which we live and work the Wellington Aboriginal Corporation Health Service 2022 Annual Report.

Before starting I would like to acknowledge all Aboriginal nations throughout our footprint and pay respect to all Elders, past, present and emerging for they are the knowledge holders and fighters who got us here and will continue to campaign for better health and wellbeing outcomes into the future. I would also like to pass on that respect to all Aboriginal and Torres Strait Islander peoples across the nation but particularly those who are trying to change the appalling statistics for our people in the areas of Health, Education, Employment and Housing.

I would like to express my gratitude as the Chair of the new Regional Board structure incorporating Greater Western Aboriginal Health Service and Maayu Mali (Moree Aboriginal Residential Rehabilitation Service) for the work and support of these very distinct and diverse communities during a worldwide health pandemic and through the restructuring and change of the Organisation as a whole.

A special thank you to all our teams across our geographic footprint, who have continued to work diligently through the pandemic and seismic shift in business operations to decentralise operational authority to the sites for more autonomy, accountability and transparency for our communities. Throughout the 2022 year we have been refocusing on expanding our partnership base locally and listening to community voices on how they best see our services functioning into the future.

Our CEO, Darren Green, has provided a platform for new ways of doing business with guidance from the Board and leadership through the Executive and Teams to expand our operations through primary health care and our community based population health prevention and promotion programs. This change, is designed to grow our own to create local leadership and create career pathways for those aspiring to be leads in the specific health fields and indeed leadership roles across this Organisation.

This year has also seen the Organisation seek business development and sustainability opportunities linking with local, regional, state and national agencies, corporates and philanthropic agents to explore ways in which the socially aware can work with WACHS to deliver on their social impacts statements and frameworks for working effectively with Aboriginal communities and the Aboriginal community controlled health sector.

2022 has dealt some very contentious and challenging circumstances of which we have had to strengthen our Governance to enhance and sustain our operational business model to ensure we continue providing professional and culturally appropriate health services for the communities in which the WACHS family of services operates, Moree, Dubbo, Wellington, Katoomba, Penrith and Mount Druitt.

Michael Peachey - Chair Person

CEO's Report

I would like to acknowledge and pay my respects to the Wiradjuri, Gomeroi, Gundungurra and Darug people on the lands of which we live and work.

WACHS continues to strive for excellence in the restructuring of its Governance and Business Operations for quality service delivery and improved population health outcomes across its service sites, Wellington, Dubbo, Moree, Katoomba, Penrith and Mount Druitt.

2022 has seen the WACHS service delivery teams for primary health care and community programs despite much adversity, change management and staving off of a global pandemic.

This year we have seen an increase across of activity and achievement across our clinic clusters, child and maternal, preventative health and chronic disease with increase partnerships to delivery our community programs for child and family, drug - alcohol and mental health, family safety and counselling services and an innovative approach to population health promotion through our Quit B Fit – Tackling Indigenous Smoking team.

Our strategy for succession planning for the WACHS entities and their teams is such that organisation learning and development will continue to build on the skills and abilities of our people to lift the maturity of our service delivery to improve across all indicators across the socio-economic and cultural health environments for our communities, families and individuals. These workforce and governance strategies will ensure not only continuity of care but enhanced health care for all.

The leadership to stabilise and continue the necessary growth is being provided by our newly appointed Executive Management team, with newly created position for Business Development and Human Resource Business Partner. WACHS has also recruited a new Chief Financial Officer who, with and expanded finance team supports the decentralised fiscal management through the CEO and Deputy CEO.

Our new structure is reflective of the voices expressed through our community engagement with ORIC and Rodgers Reidy to be more present and responsive to the needs of the community to ensure our services support our most vulnerable, reduce duplication through community partnerships and work towards independence for the Greater Western and Moree communities.

2023 sees our continued commitment to our aspirational goals of providing quality health services that support the growth of the business for sustainability into the future.

Darren Green - CEO

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Corporation Health Service



Wellington Aboriginal

Wellington Clinic

About the Clinic

Our Wellington Clinic provides effective community based primary health care services and we strive to have a healthier community by providing services that can be accessed easily by the Aboriginal and wider community of Wellington. We provide care with our GP services, primary clinic care by Nurses, Aboriginal Health Practitioners and visiting specialists' services such as Podiatry, Diabetes Education and Counselling services.

The WACHS Clinic team is a multi-disciplinary team working across the 3 clinical clusters and community programs for Child and Maternal health, Preventative health, and Chronic disease.

Dr. Roslyn Brook's has continued to support WACHS with Locum GP support when available. This support will continue until we secure more permanent GP's.

- Child and maternal health
- Preventative and Primary Health Care
- Chronic disease

Outcomes

After the COVID lockdown and restrictions ended, our reception personnel kept screening every patient who entered the building in accordance with the COVID risk assessment protocols, wearing of masks within high-risk settings such as the clinic remain compulsory.

Program delivery outside of the service has commenced to rebuild important relationships within the schools, hospital and Maranatha.

Drug and alcohol visits were reduced which is reflective in our numbers, but we are moving back towards more face-to-face consults weekly.

Some staff shortages in out clinical areas have put limitations on maternal and child health care but we are working on ways to improve in this area and up skill current staff.



Lead by our two Team Leaders our clinic has:

- 2 AHP
- 1 AHP clinical
- **1 New Directions**
- **1** Occupational Therapist
- **1 Speech Pathologist**
- 1 Child Maternal Nurse
- 1 Dietician
- 1 Clinical Admin
- **3 Medical Receptionist**
- 1 Transport
- 3 x GP
- 1 x Nurse Practitioner
- 3 x Cleaners
- 1 x Medicare Officer

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GP shortages in Australia have impacted access especially in all rural and remote areas. The number of general practitioners decreased from 5 to 3.5 within WACHS, Dr. Bijay Pandey continued to work full-time, Dr. Caroline Ivey worked part-time, and Dr. Thein Zan worked as our full-time registrar. Dr. Ivey has finished her supervisor training and can now supervise registrars.

Gps

Dr Bijay Pandey Full-time Dr Caroline Ivey Part-time Dr Thein Tun Zan (Registrar) Full-time Dr Roslyn Brooks - Locum

Nurse Practitioner

Colleen works 4 days a week and is in the process of expanding her scope of practice which will enable her to provide a broader service as a Nurse Practitioner. Colleen currently is able to provide generalised treatment, care and script to patients within her scope of practice.

Clinic Nurse/ Aboriginal Health Practitioner

Denise Barwick continues to work in the clinic as an Aboriginal Health Practitioner (Clinical). She has adapted well to the setting and has been collaborating closely with team leaders and GPs to hone her skills. Denise remains dedicated to learning and training which is shown by finishing her immunisation training and recently completing a Diploma in Practice Management.

Transport

WACHS Transport provided 803 transportations and out of this 553 required Taxis due to COVID.

Our new Transport officer Kyran settling in well, ensuring patients were able to attend important appointments. When transport officer is out of town we continue to offer taxi and bus services to ensure maximum care was given to our Aboriginal Community.

All staff continued to minimise risk through continuous monitoring and screening of clients.

Vaccinations for COVID took priority early last year. A whole community approach and collaboration with the Local Health Service provided a community vaccination clinic to help keep our community safe. The clinic began vaccinating end of March /April and had all our staff here fully vaccinated by July.

Visiting services

During the year, 882 patients were able to use our podiatry service providing annual diabetes testing and routine foot care.

All though our numbers have decreased the demand for our visiting cardiologist who makes the trip from Sydney to Wellington to see our clients remains high. The GPs and AHPs from the Clinic have supported the Cardiologist's with telehealth appointments when unable to attend face to face.

We continued providing spacers and Ventolin to patients through QUMAX funding to support management of respiratory conditions in our Aboriginal community.

The NSW Health D&A Counsellor continues to works with WACHS for our clients to have access within our clinic, they can also receive assistance from our Social Emotional and Wellbeing team. Additionally, these visits have helped clients get access to rehabilitation resources.

Our Clinic continues to supply Nicotine replacement therapy to clients to support them to be able to give up smoking, this covers a variety of options, including lozenges, gum, inhalers, patches, and gum.

Respiratory specialist Anna Mclean continues to provide specialist care to patients with Chronic respiratory conditions, along with our Podiatrist Sreenathudu Arshanapalli (Sam), continues to provide podiatry services to WACHS. Diabetes Educator Alison Logan, continues to visit and provide Diabetes Education and support, along with Carina our visiting optometrist.











Drug and Alcohol Counsellor 76 client contacts

Social & Emotional Wellbeing Program

About the program

Our program supports Indigenous community members aged 15 years and older (and their families) who are assessed as vulnerable in terms of health, social & emotional wellbeing, drug, alcohol and substance misuse or offending, violence and victimisation.

We strive to strengthen social & emotional wellbeing wherever possible by providing counselling, healing activities and/or other social & emotional wellbeing supports to Indigenous people. The program also aims to support strong, healthy, and resilient individuals, families and community, which in turn may enhance pathways to education and employment and reduce substance abuse, violence and contact with the criminal justice system.

Outcomes of program

- Ensure Indigenous Australians enjoy similar levels of physical, emotional, and social wellbeing as those enjoyed by other Australians

• Ensure that ordinary law of the land applies within the Wellington community

Our programs

The Migay He Migay Healing Group

This program creates a culturally safe place for local Aboriginal women who have experienced trauma to gather and support each other. It will promote the well-being and healing of all participants focusing on their strengths, skills and knowledge. It will also incorporate education and awareness and capacity building in the prevention of family violence, addiction, grief & loss, and other social determinants identified by the group.









Case managed











Men's Group

The program has been designed for the purpose of the improving the social & emotional well being of our Aboriginal men in the Wellington Community. This will be done by interaction between participants through their conversation, as well as through the passing on and the learning of new knowledge particularly that of the wellington and surrounding districts.



Elder's Bingo & Information Day

This program was designed for the purpose of educating Aboriginal Elders aged 50 years and older around the services available in Wellington.

It was used to engage Aboriginal elders and encourage them to utilise the services such as Marrabinya, My Aged Care, Senior's Card, Senior's Travel card etc. Each attendee was given an information pack, which had brochures and information.

The event is an alternative process to educate and empower seniors and connect them with local services to improve their well-being and lifestyle, enabling them to stay in their homes longer.

Food Hampers

In 2022 the Social & Emotional Wellbeing Team delivered around 500 food hampers including, frozen meals, fresh fruit and vegetables and Christmas hampers to community members. These hampers were donated by Yindyamarra Aboriginal Services and department of Aboriginal Affairs.





Drug & Alcohol Program

About the program

The SEWB Drug & Alcohol Program supports Aboriginal people in Wellington who are seeking support around their drug & alcohol issues. It focus is to provide culturally respectful and sensitive drug and alcohol programs and services for Aboriginal people, including referrals to specialist services, health promotion and case management.

Outcomes

- Increased access and awareness to drug & alcohol services and supports available for community
- Harm minimisation
- Improved health outcomes for Aboriginal people

Roadmaps

Our team have formed a working partnership with Lives Lived Well to deliver a program called Roadmaps to enhance the wellbeing of those struggling with drug or alcohol addiction. This program is driven by Lives Lived well but fully supported by our SEWB Team Drug & Alcohol Worker.

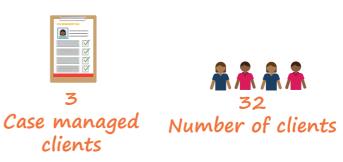
Yindamarra Men's Group

Delivered in partnership with WINS, Probation and Parole and Jeff Amatto. Jeff is a local Wellington/ Wiradjuri consultant whose lived experience in some of life's greatest challenges has seen him create a successful program for local men either in recovery or seeking support to start their journey of healing.

There have been many great outcomes from the program including:

- Creating a safe space for self-reflection and personalized one on one interactions for recovery
- Empowering men to set their own goals for employment and training
- Offers the chance to give back to their families and communities
- Installs pride in their aspirations as a group
- Creating leadership within the group

A significant outcome is the men attended representing Wiradjuri at the Yuin and Gomeroi gathering on Yuin country, it's the first time Wiradjuri has joined this cultural event and its clear the men came back culturally reinvigorated.







Family & Domestic Violence Program

About the program

The SEWB Family Violence Prevention Program supports Aboriginal families in Wellington who are seeking support, information and/or advice around family violence matters.

Outcomes

- Positive outcomes for families, women and their children by working across sectors to improve the safety and wellbeing of children
- Advancing gender equality
- Reduce violence against women and their children.

Our impact

White Balloon Day

The SEWB Aboriginal Health Violence Prevention Program developed an event for National Child Protection Week with the support of Dubbo Community Health Centre to raise community awareness to protect our children.

This event was designed to educate and empower our children, individuals and our community to implement the safety measures ensuring our children become our priority of when to speak up. This program is designed to educate our children, Parent, Guardian, Carer, Teacher and Community on what services are available to protect our children and young people.

Children from Wellington Public School, Wellington High School, St Mary's Central and Wellington Christian School were invited to attend. Students were selected to participate in a chalk activity where they wrote a message about what White Balloon meant to them, then they participated in releasing of white balloons to commemorate the day.



White Ribbon Day

This program was designed to educate, support, and empower our community, men, boys, and individuals to implement and promote the world's largest movement to create and build positive, and healthy respectful relationships. Also to raise community awareness to say No to Violence against Women.

The program can be used to build and focus on a shared vision of ending violence towards Women and increasing confidence in raising awareness and connecting with appropriate support services and mentors.

A guest speaker from the Mission Australia's men's behavioural change program spoke about their program. Following the formalities, male attendees were invited to participate in activities which included taking pledges following a hand painting activity that will solidify of honoring participants taking of pledge.

This event focus was to create awareness, empower, encourage, and educate around the purpose of White Ribbon Day.



Aboriginal Children's Therapy Team (ACTT)

About the program

ACTT is a free allied health service for Aboriginal and/or Torres Strait Islander children living in Dubbo, aged from birth to eight years of age. Using a culturally appropriate framework we offer Speech Pathology, Occupational Therapy and Psychology services in partnership with Aboriginal Community and Therapy Support Workers.

ACTT aims to improve the availability of Allied Health specialists to Aboriginal children in the Dubbo community and improve health outcomes by providing developmental screening, assessments, and targeted therapy to clients, as well as a focus on health promotion and building the knowledge, skills and involvement of parents and carers in their child's developmental journey.

Outcomes

ACTT continue to adapt our service delivery to be able to provide therapy and support to families accessing our services.

ACTT continue to invest in the upskilling of the ACTSW's to enhance our service delivery. Our ACTSW will commence with further education in 2023 to enhance their skills and qualification by completing their Cert IV in Allied Health Assistant. This will enable them to take on more Therapy Aid programs which will reduce the waitlist for Speech Pathology and Occupational Therapy. Our ACTSW have also completed Circle of Security Training, Mental Health First Aid and Indigenous Domestic Violence training.

Strong relationships with variousCommunity education, NGO's and health partners has increased referrals for Speech Therapy and Occupational Therapy. ACTTs holistic and flexible service delivery model compliments ACTT clients to achieve improved outcomes. Our ACTSW's work closely with schools and early childhood facilities to run therapy groups and individual sessions. Having that extra support from the ACTSW makes the families comfortable and helps build the trust between the family and a new servic. Our links with various health and community programs ensure that clients are engaged with programs that meet their needs, for example Mission Australia (Early Childhood Early Intervention) and ACTT work together to provide a smooth transition from ACTT to NDIS. The team at ECEI can come to our building to meet the family's and run through applications with the support of our ACTSW.

Intake/therapy sessions









40 Occupational Therapy Referrals





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Aboriginal Community Therapy Support Worker

ACTT Aboriginal Community and Therapy Support Workers (ACTSW) continue to play a pivotal role in the program. ACTSWs work closely with families throughout their therapy journey with ACTT. They support to families to be able to meet 'family centered' goals by provide cultural support to enhance the relationship between the family, ACTT and other mainstream health services and education facilities.

In their role, the ACTSW coordinate's initial intakes for new referrals, attend therapy appointments, facilitate attendance to appointments, follow up with families after therapy appointments to ensure best client outcomes and provide Therapy Aid program to individual clients supported by the Speech Pathologist and Occupational Therapist.

Speech Pathologist

Due to challenges recruiting to vacant therapy positions, ACTT initiated a Speech Therapy outsourced model of care. Speech Pathologists were engaged to deliver face to face Speech Pathology services to ACTT families. Clients and their family were supported during and after therapy sessions by our Aboriginal Community and Therapy Support Workers (ACTSW). The team worked closely with teachers, early childhood educators to provide targeted therapy for children. In addition to therapy provided by clinicians, our ACTSW continue to conduct therapy aide programs, under the direction and support of therapists. This model of care allowed for greater throughput of clients, and saw a reduction in ACTT waiting lists, as it allowed greater flexibility in service options for families.



Occupational Therapist

Recruiting to our Occupational therapy position also proved a challenge and again ACTT looked to a local provider to deliver face to face therapy for ACTT clients and provide clinical support to the ACTSWs, who ran additional Therapy Aide Programs and targeted small group sessions. Clients continued to receive an OT service, and good outcomes were linked to the support provided by our ACTSW in supporting the OT to meet client goals.

Child Psychologist

Recruiting to our Psychologist position also proved a challenge and ACTT continued working with a local partner service (partnering since 2016), providing children and families with targeted intervention. Intervention provided by the Psychologist included child "play based" therapy supporting children in the development of a range of emotional and behavioural concerns, as well as parent education and individual councelling.





Australian Nurse Family Partnership Program (ANFPP)

About the program

In Australia, the ANFPP is funded by the Federal Government to assist in closing the gap in disparity between Indigenous and non-Indigenous families through early intervention. Now operating nationally in 15 sites, the WACHS ANFPP was one of the first sites and has a long history of positive client outcomes, many of which are not shown in the data, but are evidenced by the stories and successes of our Mums.

The Australian Nurse-Family Partnership Program (ANFPP) is an intensive home visiting program, with the WACHS site providing services to Wellington, Dubbo, Narromine and Gilgandra. Clients are first time Mums pregnant with an Aboriginal or Torres Strait Islander baby, or who are having an Aboriginal or Torres Strait Islander baby and haven't had the opportunity to parent any pervious children. Each client has a home visiting team, made up of an Aboriginal Family Partnership Worker and Nurse Home Visitor (RN and/or RM) who work with the clients and their support people until their child's second birthday, providing support and education about, parenting, and goal setting and how to promote healthy lifestyles.

Our impact

The start of 2022 was challenging for WACHS ANFPP, there were only 2 staff these staff both being Aboriginal Family Partnership workers (AFPW) with a client load of 30. Both AFPW's worked together to continue the service delivery to the clients. With no nursing staff ANFPP eventually had the support of a midwife within the WACHS clinic in Wellington who helped contact clients for any nursing information or guidance they may have needed. Clients were understanding through this difficulted time and were patient with staff. Dubbo ANFPP employed two AFPW's in August 2022 one being full time and the other two days per week, as well as Nurse Home Visitor (Full-Time) and Nurse home visitor (Part-Time). This has now allowed for Dubbo ANFPP to nearly reach full staffing and allowed more service delivery to all clients.

The ANFPP is based around five client centred principles to ensure our clients gain enhanced selfefficacy and empowerment through their time on the program.

As ANFPP is an intense home visiting program we have learnt how to navigate through challenges of COVID-19, so clients are still able to achieve the program in the fullest potential. This includes still being able to use the telehealth model of delivering the program if the mum, Baby, or family are un-well with COVID.

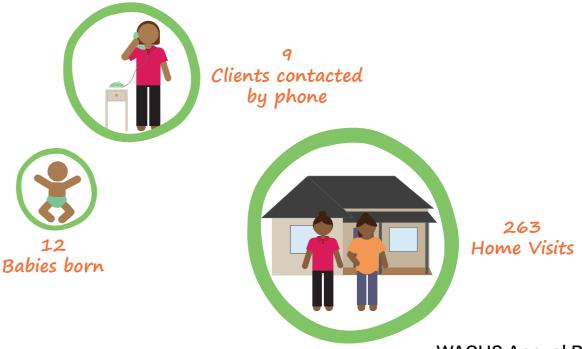
The ANFPP team have continually adapted to meet the needs of our clients through times of transition and change. Many of our Mums have had several home visiting team members but have remained engaged in the program with several graduations this year. These clients have shown resilience and commitment through the implementation of a telehealth model of care during COVID restrictions and staff retention, establishing new relationships with team members as staff have left and joined the Program. This provides evidence of our team members' ability to engage clients with the Program and the different styles of content delivery of each team member. Throughout staff retention within the Dubbo ANFPP staff were still able to continue to provide service delivery to the best of their ability to the mums and their babies.

Resources have been adapted to meet the needs of our clients, including some using Wiradjuri language following on from previous training in this area. The ANFPP and ACTT have developed a referral and handover tool based on ISBAR, facilitating a smooth transition for clients between the two services. Interagency meetings in all four locations are attended regularly by team members, building relationships with services to ensure we are aware of what is available in communities for our Mums and their families.

Each month, team members attend role specific national Community of Practice meetings for ongoing professional development, support, and knowledge sharing. While COVID has impacted the ability to attend face to face training in previous years, team members continue to build their skills and knowledge by attending online training opportunities and webinars, when available, ensuring our Mums continue to receive the most up to date and relevant evidence-based information.

Two staff members at ANFPP Dubbo completed the DANCE training gaining proficiency in 2021. Our site was the first where Aboriginal Family Partnership Workers gained proficiency in the use of DANCE, a specialised dyadic observation tool.

Dubbo ANFPP have attended multiple community engagement events within the last year, building relationships with service providers to work collaborative to ensure the best support is given to our mums and their families.





Quit B Fit - Tackling Indigenous Smoking

About the program

Quit B Fit - Tackling Indigenous smoking has had significant learnings throughout the pandemic, org restructure and the TIS Tender for services - 2023 to 2026. Our team has moved to more innovative health promotion activities and local community engagement strategies to ensure local community and cultural protocols were adhered to for program logic and ultimately expansion.

The Quit B Fit team is funded by the Australian Government to deliver the Tackling Indigenous Smoking program, as part of the Closing the Gap initiative. The focus is health promotion, awareness and prevention program to provide Indigenous people with tools and resources to live healthier lives without smoking cigarettes. The Quit B Fit team covers a large area of New South Wales incorporating the Central West, Far West and New England regions

Our Impact

Our program led two major health promotion events in Coonamble and Wellington, with 240 participants across both communities. We also led education sessions throughout our program, ran pledge activities and worked on multimedia projects to enhance community engagement.





468 Pledges to quit smoking, have smoke free homes and cars

4 youth priority target groups education sessions

Channel 9 Quit B Fit TV commercials 313 times during Australian Open Tennis Content creation for 6 episode first season Quit B Fit podcast

x 100% owned local and TV commercials and social media

Followers: 1451 (June 22) up 1,473 ^ 21 likes Reach: 5,986 Engagement: 1,475 (likes, reactions, comments, shares) LinkedIn: 361 reactions and impressions, 8 reposts, Website page - Tackling Indigenous Smoking General web page 225 visits Amazing Race Campaign Pledge web page activity 1424 visits

1 mums and bubs priority target group education session

1 mens priority target group education session

1 Elders priority target group education session 2 x Maayu Mali resi-rehab education session for support and resources to quit whilst in recovery



1 Koori Radio Redfern interview

1 Channel 9 TV interview

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5 partnership events -Walford Shield, Souths TV commercials, Rose Cup, Gibbs Knockout



3 Tennancy Support Education Events, Engonia, Lightning Ridge, Collarenebri

Facebook page visits: 213





Maayu Mali - Moree Aboriginal Residential Rehabilitation Service

About the program

The purpose of the program is to promote individual and community wellbeing and reduce harmful substance use through the provision of culturally appropriate alcohol and other drug (AOD) prevention, education, treatment, rehabilitation, and aftercare services for Indigenous Australians.

Maayu Mali provides a minimum 12 week residential rehabilitation program for 14 men and 4 women aged 18 years old and over and over with a 21 month aftercare program. Maayu Mali accepts clients from all over NSW, but majority of our clients come for Western and Northern NSW.

The program aims to provide a holistic approach in supporting and healing the whole person including the provision of individual and group treatment, individual case management, skills and training, recreation support, health and fitness well been and art and cultural support.

We support individuals to improve their quality of life and focus on recovery using a trauma informed and cultural healing focus aimed at achieving long-term sustainable outcomes.

Our impact

100% of clients undertake a comprehensive assessment and an individualised treatment plan

100% of client's co-design an aftercare plan

Through our service client's participate in a treatment program including therapeutic groups, case management, cultural, recreation, training, and education activities

Our Maayu Mali COVID risk assessment plan for the safely of our clients is completed during the program, which includes providing safe mechanisms like serving food separately, creating isolation rooms and hand hygiene practices.

We have improved the culturally safe environment by arranging facetime with family members with client access to mobile phones.

During the Moree floods we provided a safe and proactive approach to housing as we looked after the wellbeing of our clients with risk plans informed from lessons learned from the previous year.





Referrals 250 received 65 accepted

Level of Psychological Distress –% improved by from intake to discharge 43%





Completed 12 week program 15 clients completed

Quality of Life Average improved % from intake to discharge 7%

Finance

Program Purpose

To develop, implement and manage the Corporation's financial management systems including budgets by funding program, payroll and reporting to internal and external stakeholders. To be accessible to all WACHS employees and provide support and transparent financial information as required

Aim of Program

To provide sound financial management of the Corporation including:

- Maintaining appropriate systems and structures to record, explain and analyse financial transactions
- To implement financial systems and targets that promote sustainability (including liquidity, self generated income and net asset targets)
- To support organisational growth through sound financial management strategies
- Monitoring the application and condition of the Corporation's assets





Positive Working Capital of \$2.36 in current assets for every \$1.00



Sources of income of \$19,079,957



The audited financial statements for 2022 confirms the following highlights:

• Total from all sources of income of \$19,079,957 (2021: \$21,674414) with unexpended grant income of \$2,488,523 on the balance sheet awaiting approval by Funders for use in 2023 financial year

• Recorded a surplus profit of \$1,863,268. Surplus funds are set aside for future investment including asset replacement and other capital improvements. Surplus was derived from \$2,639,103 in Medicare income across the clinics which was unspent due to the impact COVID had on WACHS ability to travel around communities to provide services and recruitment of qualified staff

 Is in a strong financial position with Net Assets of \$17,949,688 compared with 2021 of \$16,086,420

 Positive Working Capital of \$2.36 in current assets for every \$1.00 of current liabilities meaning the Corporation is able to pay its debts as and when they fall due

 On 20 September 2021 WACHS was placed under Special Administration by ORIC and the Director positions were vacated. At the end of the Special Administration on 27 May 2022, a new Board of Directors was appointed to take stewardship of the Corporation

Net Assets: The Corporation has net assets of \$17,949,688

• There is no impact to the financial statements for the year ended 30 June 2022 of financial irregularities identified in the 2021 and prior years

• No new matters were raised in the FY22 Management Letter report from the auditors and of the 14 points raised in FY21, 12 have been completed and 2 are in progress to be completed in December 2022 highlighting that improved systems and processes have been implemented.

The Corporation is in a strong financial position and looks forward to the future.



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Work Health and Safety

Program Purpose

WHS is all about keeping our organisation up to date and compliant with any WHS legislation/regulations changes also including WACHS policies and procedures.

Aim of Program

Coordinating ongoing mandatory training to all WACHS sites. This includes Fire training, First Aid and CPR, Work Health, and Safety Education days. All staff also complete Infection Control, Manual Handling and Risk Assessment modules on AMSED.

Monthly Action Plans on WHS are set out 12 months in advance, this year 2 action plans were COVID 19 focused. Wellbeing checks were sent out to staff working from home. Ensuring that staff working from home have completed a WH&S workplace checklist.







Risk Mitigation

The WACHS Work Health and Safety program is a part of the broader WACHS risk management plan. A key area of work for WHS is as part of the Board reporting, Clinical Governance Committee and Training and Development strategies.

Training

WACHS WHS delivers a range of accredited training packages aligned to our strategic plan, risk management plan and mandatory accreditation processes.

Current training delivered across all WACHS service sties:

- Fire annually
- **CPR** annually
- First Aid tri-annually
- WHS education workshops annually
- AMSED online modules
- Aboriginal Mental Health First Aid

As of June 2022, 100% of existing staff have completed mandatory training with a training schedule for new staff is in development for 2021-2022 financial year.

staff.

Our WHS education workshops include:

- Risk management
- Infection control
- Fire training
- Manual handling
- Knowledge tests
- Emergency response and evacuation processes
- SafeWork NSW
- Service NSW
- PPE correct way of putting on/taking off
- Mask fitting correct use of surgical/ N95 masks



Every year our WHS team conduct onsite 2-day workshops for each service site with

Greater Western Aboriginal Health Service



About Us

GWAHS is a health service for Aboriginal and Torres Strait Islander people in Western Sydney, Nepean and Blue Mountains regions. Services include GP's, health checks, chronic disease programs, men's health, drug and alcohol and mental health and child and family services.

Our Vision

To provide and be recognised for providing the Aboriginal community of Western Sydney with high quality, appropriate, efficient and effective primary health care and related services.

Our purpose

To provide the highest standard of client care whilst incorporating a holistic approach toward diagnosis and management of illness

respect

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2. We are committed to promoting health, wellbeing and disease prevention to all clients We do not discriminate in the provision of excellent care and aim to treat all clients with dignity and

Mount Druitt Clinic

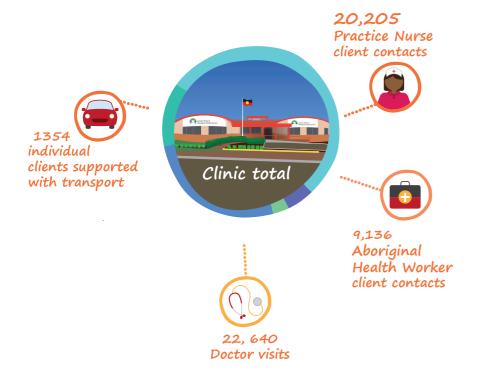
About the Clinic

Mt Druitt Clinic provides culturally appropriate primary health care services tailored to the needs of the Aboriginal and Torres Strait Islander community through diagnosis, treatment, prevention and health promotion. This approach aims to deliver effective care to improve overall health outcome of Indigenous people living in Greater Western Sydney region. Our clinical services include the treatment of acute illnesses, providing emergency care, the early detection and management of chronic conditions, Promoting and encouraging annual Flu and booster doses of COVID-19 vaccination, Childhood and adult immunizations, sexual health, mental health, women's health and preventative health such as healthy lifestyle education and smoking cessation.

Out impact

April 2021 Mt Druitt Clinic successfully passed AGPAL accreditation. We are continuously providing high standard of care to our clients, also actively maintaining community engagement and communication with stakeholders. We also focused on chronic disease management by arranging regular Diabetes and Psychiatric case conferences and group education sessions. We have built a strong partnership with Clontarf Foundation and conducted Health Checks for 255 Aboriginal kids. Various activities were organized for the Clontarf kids which encouraged them to participate and have a positive health experience. Sexual Health and Vaping educational was organized for Clontarf academies with great outcome, other school expressed their interest in having this as an ongoing event for the kids.

Our clinic continued improved access for our indigenous clients to health assessments, childhood immunization, chronic disease management and disease prevention. Regular recalls, community upskilling educational events, we organized KPI Training for all staff to improve KPIs and promote health outcome for the community.



From July 2021, GWAHS clinic experienced severe shortage of GP which led to community frustration, inconvenience, and increased workload for existing workforce. As a solution to this problem, extensive attempts have been made for GP recruitment. We have approached GP networks, RDN, GP Synergy, and AHMRC to resolve this issue and meet the increased community demand. Finally, we have been successful in recruiting 2 part-time Doctors and 1 full time GP registrar. Before the GP recruitment, the waiting time for obtaining an appointment was 8-10 weeks but now the waiting time has been reduced to 2-3 weeks. This enabled us to respond to community needs and provide the required service in a timely manner.

Key Achievements:

- Resolving issues related to GP shortage
- Recent employment of speech pathologist weekly Thurs/Fri
- More GPs in clinic-less waiting time for clients
- New onsite ENT specialist
- Full reception staff and Admin Coordinator
- Team work between all clinics: All thanks to the new management.

Health Checks and partnerships

GWAHS clinic team attended Clontarf health checks for Chifley College Bidwill on the 30-31 August 2022, following the health check on the 7th of September 2022 the GWAHS team was invited to a Super Training activity with the Clontarf boys from Bidwill chiefly college, two of staff from clinic attended. It was a great experience getting to build rapport with the boys and the Clontarf team as a whole. Attending this activity has strengthened our partnership with the Clontarf foundation. Clontarf health checks (catch-ups) have been conducted on 19th ,20th and 25th October'22 and health education sessions have been organised for Clontarf students to facilitate health promotion and disease prevention. The event was facilitated by Elka Tinker from LHD and GWAHS Clinic. Positive feedback received from Clontarf academy staff, students and families with their health check and follow up experience at GWAHS clinic and they loved the South Sydney Rabbitohs Jerseys following their health checks.



Visiting Services

Visiting services was postponed for most of the year in 2021, however, we continued our paediatrician service via tele-health or phone consultation. In the beginning of 2022, all our visiting specialist, Paediatrician, Paediatric Registrars, ENT specialist, Optometrist and Allied Health such as Audiology, Speech and Podiatrist services were re-commenced and started delivering the care to our clients.

Paediatrician Our Paediatrician visits our clinic once a month, provides specialist care for Aboriginal kids aged up to 14 years. A total of 247 clients have been seen by the Paediatrician between 01/07/2021-30/06/2022. The service includes behavioural assessment, developmental assessments

and ongoing treatments. A total of 46 clients seen by paediatric registrars.

Audiologist and ENT specialist This service is funded by the Rural Doctors Network for hearing assessment and treatment of Aboriginal kids aged 0-21 years and operates every fortnight. We also have an Audiologist under HAP-EE program from Hearing Australia for 0-6 year old's for hearing test and assessments. In addition, Hearing Australia provides a Hearing aid service for our clients over 50 years of age. Total 225 clients have been seen by ENT specialist and Audiologist at GWAHS-Mt Druitt Clinic from 1/7/2021-30/6/2022.

Speech Speech students from Sydney University attend our clinic for speech assessment for the Aboriginal kids in conjunction with the Connected Beginnings team and arranged by the Aboriginal Health Worker to ensure culturally appropriateness and advocacy. The positon for Speech pathologist has been filled from July 2022. The total of 158 children has been seen by the Speech pathologist since.

Podiatrist is funded by Rural Doctors Network to provide care to our clients which includes diabetic foot care, annual foot check, and high-risk foot conditions. The clinic is delivered weekly for our clients. Total 232 clients with diabetes received podiatrist service at Mt Druitt Clinic between 1/7/21 and 30/6/22.

Optometrist Every fortnight a regular eye check and monthly a diabetic eye check Clinic operates. The service is facilitated by our Clinic Nurse to ensure adequate follow up. Total 65 clients with Diabetes had their annual retinal check with the Optometrist.

Dental Dental service is provided by Western Sydney LHD for Aboriginal clients of GWAHS. The dental team consists of 3 Dentists and 2 Dental Assistants. There is a high demand for this service in the community. The total of 385 clients were seen by dental between 1/7/21 and 30/6/22.

Psychiatrist Dr Singh has continued to provide Psychiatry services to all eligible GWAHS clients. Throughout the 2021/2022 period COVID continued to impact the ability for face to face services. Video link and telephone services remained available to existing clients. The demand for psychiatry services remains significant and appointments for follow up services is challenging. Dr Singh currently has 91 active clients, 16 on the waiting list and 6 clients have been successfully been discharged. Referrals for this service are accepted from all GP's across the 3 GWAHS sites.

Audiology The HAP-EE clinic is supported by Hearing Australia and is currently offered monthly. The HAP-EE program facilitates diagnostic hearing assessments to ensure early detection and treatment of hearing loss in the 0-6 year's age group. Since the resumption of face to face clinics, 30 children have been assessed and appropriately referred as required.

ENT Audiology and Speech Clinics- Penrith Clinic has been successful in securing visiting ENT specialist, Dr Su Para and Audiologist, Mridula from Macquarie University. The specialists have commenced visiting Penrith Clinic monthly since August 2022. Securing a speech pathologist has remained a challenge, however the search will continue until a candidate can be secured.

Penrith Clinic

About the Clinic

Penrith Clinic plan, deliver, co-ordinate and advocate for effective clinic and community- based primary health care services the Aboriginal community of Penrith and surrounding areas. GWAHS- Penrith provides a culturally sensitive holistic primary health care service that incorporates traditional values with a commitment to enhance the health & wellbeing of the Aboriginal and Torres Strait Islander community of Penrith.

Our impact

Our Penrith Clinic has continued to establish and maintain good working relationships with external stakeholders including the PHN, NBMLHD, RDN, Centre for Population Health (NSW Health), Hearing Australia, Legal Aid, One Point Health Podiatry, Justice Health, Headspace, WHO's Hub, Koolyangarra, SRAC and Nemai National. These relationships have evolved into GWAHS representation on various steering and advisory committees throughout the region.

During the 2021/2022 reporting period the Penrith Clinic had a fulltime GP for 3 month period. Dr Shahram Mirrhoseini was the successful candidate and appointed in September 2021 to commence in October, in January 2022 made the decision to leave GWAHS. Once again the challenge begun to recruit a full time GP. This task was made even more difficult by the impact of COVID restricting GP movements. Dr Pauline Vunipola continued to support the clinic intermittently 4 days per week. Whilst some services were limited the clinic team continued working tirelessly to provide services to the Penrith community and this included but was not limited to 8276 client contacts, 1649 COVID vaccinations, 267 health checks and 702 new clients registered.

We held a team planning day that was attended and well received by all staff. The staff actively participated and were forthcoming with some great initiatives and ideas for the service delivery for the Penrith community. Finally, a fulltime GP has been secured for Penrith Clinic and Dr Johnson Osei-Hwedieh has commenced working at Penrith Clinic full-time from 16th November 2022. The new client number has increased significantly at Penrith Clinic following Dr Johnson's commencement. Total 299 clients have been seen by Dr Johnson since his commencement at Penrith Clinic.

Community engagement has been limited as organisations dealt with the ever changing Pandemic and its impacts. Towards the end of the reporting period events began to emerge. GWAHS Penrith participated in a community event held at Koolyangarra Cranebrook. It was a beautiful sunny winter's day and this saw a large number of the community pass through the gates to enjoy a BBQ, yarn and access to a number of services. This was not only a networking opportunity but a great way to connect with the community.

Monthly health promotion/education focussed in the clinic waiting room and consisted of topics including men's health, Flu vax, breast cancer, diabetes, domestic and family violence, mental health and heart health. A display was created for World No Tobacco Day and clients were treated to quit smoking merchandise.







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Visiting Services

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Katoomba Clinic

About the Clinic

The Katoomba-Healthy for Life clinic provides culturally sensitive health care service for Aboriginal clients in the Blue Mountain health region. The aim is to provide highest standards of health care incorporating a holistic approach towards diagnosis and management of health conditions. We are committed to deliver comprehensive health care for the clients through disease prevention and health promotion.

The practice staff comprises of a General Practitioner, Practice Manager, Registered Nurse, Aboriginal Health Worker and Two Receptionist/Transport Officers

Our impact

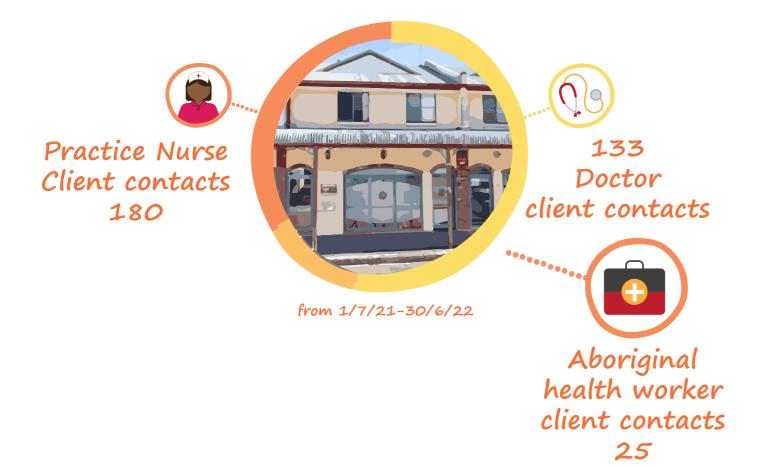
Katoomba Clinic managed to recruit a permanent full time GP – Dr Riza Cimen. Dr Cimen also does once a month Outreach service and is very passionate about Aboriginal Health. He has been working in various rural and remote Aboriginal setting for the past 10years or so and comes with a vast experience in providing health services to the Aboriginal communities with a thorough understanding and knowledge of health issues impacting on the Aboriginal & Torres Strait Islander people.

The clinic also managed to support our Receptionist, Ms Jemma Howell to upskill herself to an Aboriginal Health Worker's position by encouraging and supporting her to commence Certificate IV in Aboriginal & Torres Strat Islander Health Practitioners course at Kingswood TAFE. Jemma is doing excellent at TAFE and is due to complete her course in May'23. During the course of her study, Jemma has been assisting in the clinic in multiple ways – triaging patients, performing ATSI Health Checks, assisting in reception with general reception duties, performing audits and providing transport services to the clients when needed.

The clinic has also managed to build great and strong relationships with other Aboriginal and non-Aboriginal organisations in the region to support each other and provide the best possible care to its community. Although Katoomba Clinic did not provide COVID vaccination services, it assisted the community members to attend to COVID Vaccination clinics to ensure that they were vaccinated. The clinic also provided RAT test kits, hand sanitizers and masks to its clients free of charge. Regular fortnightly well-being check calls were made to our vulnerable clients during the lockdown and COVID period to ensure that they were doing well. Telehealth services were also implemented by the clinic to cater for its clients health needs.







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(ANFPP)

About the program

The Australian Nurse-Family Partnership Program (ANFPP) is an intensive home visiting (HVT) program, with the GWAHS ANFPP Team site providing services to the Blacktown and Penrith Local Government Area, Penrith, and Nepean areas. To be eligible for ANFPP, potential clients must meet the 4 eligibility criteria below:

- Pregnant Aboriginal and/or Torres Strait Isl Torres Strait Islander baby.
- 2) Less than 26 weeks Pregnant
- 3) First time mother or first opportunity to parent
- 4) Living within the Blacktown and Penrith Local Government Area

Each client is allocated a home visiting team (HVT) once consented to the program, this is made up of an Aboriginal Family Partnership Worker and a Nurse Home Visitor (RN and/or RM) who work with the client until their child's second birthday, providing support and education about healthy lifestyles, parenting, and goal setting. For each client the HVT aims for 64 home visits; 14 home visits during pregnancy; 28 home visits during infancy; and 22 home visits during toddlerhood.

Our GWAHS ANFPP Team visits many women who are incarcerated or completing rehabilitation. They are unable to do this when visiting is restricted. ANFPP had no face-to-face visits with clients in custody in 2022 due to the Prison complexes restrictions. This was disappointing for both team members and Mums. We have been able to contact some Mums by phone and/or Zoom but this is dependent upon staff being present to facilitate this, and can make engagement and the development of therapeutic relationships difficult.

Our impact

The ANFPP team have continued to adapt to the changing restrictions throughout the year, with visits performed interchangeably by telehealth or in person. Visiting depends upon levels of restrictions. The team continually work to meet the emerging needs of our clients and community and the changes in society, which has never been more important.

The team continue to attend interagency and inter-service meetings via videoconference to ensure we are aware of the services available in our community and to advocate for the needs of our families. ANFPP staff have been committed in making positive progress in re-connecting and building productive relationships. Group days with clients are back and are popular with a successful Christmas group day, the first in two years to celebrate the end of 2022.

Despite restrictions, the team have provided 369 home visits this year (with "home" being identified as an in person visit, at a location of the client's choice), and we have had 28 babies born on the program in 2022.

Australian Nurse Family Partnership Program

Pregnant Aboriginal and/or Torres Strait Islander woman OR having an Aboriginal and/or

ent cal Government Area

The main goals of the **ANFPP** are as follows:

 To improve pregnancy • To improve child health and development • To improve parental life course

The ANFPP is based around five client centred principles to ensure our clients gain enhanced selftheir time on the program.

1. Follow your hearts desire 2. You are an expert in your own life 3. Focus on solutions 4. Focus on strengths 5. Only a small change is necessary



Staff

Having completed training, team members proficient in DANCE, Unit 3 and Circle of Security were able to commence implementation with families, with a focus on positive interactions between our Mums and their Bubbas. Both NHV's and AFPW's complete these trainings online and off site, to ensure staff are able to support each other by understanding the underlying principles and how to adapt them to each client.

The team continue to work with a number of Government and non-government organisations to ensure the needs of our families are met. When GWAHS returned to restrictions, the team arranged for the delivery of fruit and veg boxes to our clients to encourage self-care and a healthy diet, and to ensure they knew we were thinking of them. Services have been identified to assist with housing, drug and alcohol use, alleviating risk of harm to children, and minimize harm from family and domestic violence. Our site continues to see high numbers of infants and toddlers fully immunized. As the push to immunize the community increased, ANFPP staff members assisted the Mt Druitt and Penrith clinics to provide COVID vaccines to members of the community.



Elders Support Program (ESP)

About the program

The Elders Support Programme provided support to Elders in the Mt Druitt and Penrith areas as a response by the Federal Government to the COVID-19 pandemic, this program began in May 2020 and ceased 30 June 2022.

The Elders Support Program in April 2022 was contracted by the Institute Of Urban Indigenous Health with the goal to build the capacity of Indigenous Aboriginal Community Controlled Organisations to become approved flexible aged care service providers and to deliver aged care services, in Western Sydney (both Nepean and Western Sydney Aged Care Planning Regions). This Aged Care Capacity Building Project when fully operational will operate from the GWAHS three sites at Mt Druitt, Penrith and Katoomba.

There are two phases to the roll out of the project, Phase One current: Mt Druitt and Phase Two, from April/May 2023: Penrith and Katoomba.

Outcomes

To support Elders from the Greater Western Aboriginal Health Service to remain healthy, independent, and connected to culture and community. To offer Elders with services that provide: health, wellbeing and fitness opportunities supporting their independence; creative and fun experiences; and opportunities to remain integrated and connected to their community and culture.

> 1241 Number of attendees at our events





Yarra Bay-attended event as GWAHS reps Mibrodale Caves- supported SEWB team to develop and implement

Community NAIDOC Event -attended event as GWAHS reps

Pink Ribbon Day, Brunch onsite GWAHS Mt Druitt-Breast and Gynaecological Cancer Awareness Day-supported clinic and all community teams to evelop and implement

Health Education-Falls Prevention and Diabetes as well as social /cultural event developed and implemented with support from Clinic/SEWB/Connecte Beginnings teams

Developed and implemented by Elders Support Team/SEWB/Clinic and Western Sydney ITC.

Impact

From March to June 2022 the COVID-19 emergency response aspect of the Elders Support Programme (ESP) provided fresh fruit and vegetables and meat and groceries, transport to our clinics and medical specialists, and health and wellbeing support, with phone and home visits to 92 Elders. There was a total number of 1303 hours of service delivery during this time. The Aged Care Capacity Building Project commenced with providing services to Elders from the Mt Druitt Clinic in September 2022. At this stage there are over 58 clients on the program. Service delivery has commenced with transport, and individual and group social support activities, health education events, health and wellbeing support. The programme also provided food and grocery Hampers to 54 Elders at Christmas.

The ESP has also applied funding for 4 Trusted Indigenous Facilitators who will work with Elders to support them into the aged care system. As well, the ESP team is finalising an application to become an Aged Care Approved Provider of community aged care programmes.

To ensure the local community has input into the development of the ESP a local Elder has been recruited on its Advisory Committee.

The ESP is also collaborating with the Baabayn Elders and the George Institute on a weekly Elders Exercise/Falls Prevention research programme.

From January 2023 the ESP team will be based at Kimberwalli Centre, Whalan where they are in the process of developing an Elders Health and Wellbeing Hub.

The Elders Support Team worked collaboratively with the programs and clinic teams to develop, implement and attend a range of community events from July 2022 to December 2022.



Connected Beginnings (CB)

About the program

The Connected Beginnings program aims to integrate early childhood with the appropriate support services in an aim to manage the child health (aged birth to 5 years) in a culturally appropriate and holistic manner. We ensure that each Aboriginal child is well-supported to have their health and education needs met. We do this by engaging with our clinic teams on key primary health care goals such as up-to-date immunisations and annual health checks. In addition, we complete age appropriate evidence-based screening of each child to ensure onward referral and early intervention in multidisciplinary care. Examples of this may include access to speech pathology, audiologist, occupational therapy, psychology, ENT or paediatric review. The team works meticulously with local education leads within the community as well as local preschools and early child care settings to focus on school readiness by ensuring quality education.

Core Components of the program:

This includes engaging families in health care to facilitate better outcomes by the time they start school with a focus on the following domains:

- physical health and wellbeing
- social competence
- language and cognitive skills
- emotional maturity
- communication skills and general knowledge

Our impact

Over the year, GWAHS- Connected Beginnings Team has worked with over 130 kids and families. This involved building clinical and cultural relationship with each child and their family, screening across developmental milestones and identifying family goals to develop a plan, any required onward referrals to health or medical professionals and further ongoing follow ups. The team also ensures that each child is appropriately linked in with an education facility to ensure an early love of learning and effective school readiness prior to starting kindergarten. A total of 99 kids were referred to both external and internal speech therapist in last year. The speech pathologist and the final year speech students from the University of Sydney work closely with each other to maximise the outcome in Western Sydney region.

Connected Beginnings team has effectively booked 254 children for our ENT and Audiology services in 2022. In addition, the team has effectively navigated the easy and quick access to specialist Paediatrician services for 108 Aboriginal children, who are receiving regular follow up care by our Paediatrician and Paediatric registrars.

The team is highly committed to be guided by the AMS care model and continuously emphasises the integration of cultural and clinical components in the same platform. This collaboration is reflected by continuous community engagement in a culturally appropriate manner.





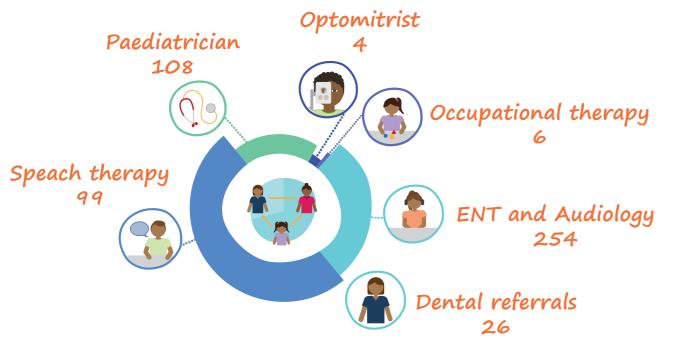




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Children enrolled 130





Social Emotional Wellbeing (SEWB)

About the program

The GWAHS SEWB Team provides access to mental health, medical and drug and alcohol services for clients within a culturally appropriate setting.

The program has successfully supported (via a care coordinated client centered model) a large cohort of clients with a range of mental health and /or drug and alcohol use disorders. The team works in a coordinated flexible way with the GWAHS clinical medical team as well as a range of visiting allied health and Psychiatric services. The team provides access to funding for specialist, allied health, and medical aid services.

Our impact

- Establishment of the Aboriginal men's group in Western Sydney in partnership with Aboriginal organisations and Aboriginal Community.
- The appointment of a trauma counsellor for SEWB client's

 Develop a collaboration model with partners and stakeholders In relation to a SEWB model within Western Sydney and Nepean Blue Mountains in line with the National Aboriginal and Torres Strait Islander Social & Emotional framework

Our Program

The Social and Emotional Wellbeing (SEWB) Link Worker is responsible for provision of support to clients of the Greater Western Aboriginal Health Service SEWB program. The SEWB program provides support with needs related to Alcohol and Other Drugs, Mental Health and broader supports around grief and loss, trauma and abuse, domestic violence, removal from family and family breakdown, cultural dislocation and discrimination.

Our Outcomes:

- Providing care coordination and direct care delivery in line with the GWAHS SEWB Model of Care and WACHS policies and procedures.
- Working in close partnership with GWAHS GP's, Practice Managers, RN's, Aboriginal Health Workers and other relevant staff to support SEWB clients accessing GWAHS clinics.

appointments and specialists appointments, and community support programs.





• Providing transport support to clients of the program as required including, for example, to medical



Aboriginal Family violence Health Worker

The Aboriginal Family Violence Health Worker provides support to clients at the clinic who have suffered family violence/trauma. Her role is to support clients to access medical and mental health and social support at Mt Druitt. The role is flexible and the worker provides support to all areas of the Social and Emotional Wellbeing team and clinical team, including assisting with screening, transports and Elders Support.

Our Outcomes:

 Developing, Implementing, coordinating and evaluating of culturally sensitive and safe family health programs that meet the specific needs of Aboriginal individuals, families and community.

 Establishing and maintaining collaborative working links with other relevant health professionals to ensure that a whole of community approach with program and services and client case planning is provided for GWAHS clients. This includes working closely with Aboriginal community elders such as the Elders Support Program and Barbayyan.

 Development of local health promotion strategies and implementing local initiatives to build on related National Health Campaigns/Promotional days.

Link Worker

The Social and Emotional Wellbeing (SEWB) Link Worker is responsible for provision of support to clients of the Greater Western Aboriginal Health Service SEWB program. The SEWB program provides support with needs related to Alcohol and Other Drugs, Mental Health and broader supports around grief and loss, trauma and abuse, domestic violence, removal from family and family breakdown, cultural dislocation and discrimination. The SEWB Link Worker has a case load of 20-30 clients from the Penrith and Mt Druitt LGAs. The clients all have complex mental health and alcohol and other drug disorders. The Link Worker provides support to the clinical team of GPs and the SEWB Psychologist and the visiting Psychiatric professionals.

Our Outcomes:

 Providing care coordination and direct care delivery in line with the GWAHS SEWB Model of Care and WACHS policies and procedures.

 Working in close partnership with GWAHS GP's, Practice Managers, RN's, Aboriginal Health Workers and other relevant staff to support SEWB clients accessing GWAHS clinics.



SEWB Link Worker:

Client support : 185 female, 185 male Client contract: female 240, male 111 Administration: female 91, male 319

Male Youth Worker:

Individual clients supported: female 55, male 125 Client contact: female 143, male 624 Administration: female 1, male 9

Visiting specialists

Drug and Alcohol Counsellor

As of November 2022 we have reached out to Odyssey House in relation to a DOA worker who attends the Mt Druitt clinic every Tuesday with the possibility of attending twice weekly moving forward.

Our Outcome:

Clients have fast and easy access to a Drug and Alcohol Counsellor. Counsellor is able to refer clients directly to Odyssey House Rehabilitation service and assist with clients enquiries. Drug and Alcohol Counsellor also refers clients to Link worker program to provide extra assistance and support to clients accessing DOA Counselling.

Psychiatrist

The availability of the visiting Flourish Psychiatric team for case conferences with the GWAHS clinical team, was a big plus for the GWAHS clients and these sessions are always fully booked. There was a total number of 36 clients seen via this program in the last financial year.

Our Outcome:

This opportunity to have a visiting Psychiatrist four times a month allows for clients to have access to a Psychiatrist and have their regular GP present for the case conference along with a Flourish support worker to assist clients with added support. This ensures the clients GP.

Trauma Counsellor

Trauma Counsellor commenced with GWAHS on the 9th of November 2022 working three days a week and has seen 8 clients, 12 appointments within 8 weeks.

Our Outcome:

Allows client's to have counselling and gain knowledge around trauma and techniques on how to address and manage issues. Trauma Counsellor also refers out to other services within the Social and Emotional Wellbeing team such as support from Aboriginal Family Violence Health Worker and Link Workers along with other Aboriginal Community Organizations.

Female Family Health Violence Worker: Individual clients supported: female 144, male 78 Client contact: female 376, male 120 Administration: female 135, male 123

Trauma Counsellor: 8 clients, 12 appointments within 8 weeks







