

Preamble

Aboriginal and Torres Strait Islander people are the oldest living people to walk on country. First Nation communities maintain a strong connection to culture, customs, language, laws and traditional lands, contributing significantly to environmental management, economic development and cultural identity. South East Queensland has one of the largest Aboriginal and Torres Strait Islander populations in Australia. Due to the gap in life expectancy, this population is also a younger population and more rapidly growing with this forecast to increase considerably over the next ten years. Metro South Hospital and Health Service has the opportunity to redesign the way it develops and delivers its services using co-design and co-delivery approaches and empowering the right of self-determination amongst Aboriginal and Torres Strait Islander people. By redesigning a health service that sees more First Nations people employed across the system, listens to First Nations voices in the system, and supports a better integrated and coordinated system for First Nations peoples, Metro South Health will ensure its services are equitable for all people and help close the gap in health outcomes.

Policy and planning context

Multiple national, state and local policies and strategies are in place to support the achievement of better outcomes for First Nations people. This has been further strengthened by requiring each Hospital and Health Service to achieve health equity for and with Aboriginal and Torres Strait Islander people via the *Hospital and Heath Boards Regulation 2012*, prescribing that each Hospital and Health Service develop a First Nations Health Equity Strategy. This Health Equity Strategy sits within the policy context of the *National Agreement on Closing the Gap 2020* which aims to overcome the inequality in life outcomes experienced by First Nations peoples compared to other Australians, and will accelerate the pace of health system reform in Queensland.

At a regional level, the *South East Queensland First Nations Health Equity Strategy 2022–2031* (SEQ FNHES) will guide the hospital and health services to work together to ensure an equitable approach to health care across hospital and health service boundaries. Metro South Health will contribute to the delivery and measurement of objectives in the SEQ FNHES where they intersect with local needs. At a hospital and health service level, the *Metro South Health First Nations Health Equity Strategy 2022–2025* complements the *Metro South Health Strategic Plan 2021–2025*, the *Metro South Health Consumer and Community Engagement Strategy 2020–2022* and our Partnership Protocol with the Brisbane South Primary Health Network to ensure planning is values based, responsive and collaborative, and meets the needs of the community in the Brisbane South catchment.



Acknowledgement of Country

Metro South Health recognises and pays respect to the traditional custodians of the land and waters—the Yugambeh, Quandamooka, Jaggera, Ugarapul and Turrbal peoples—and to Elders, past, present and emerging.

Our response

Metro South Health will develop an implementation plan to ensure this strategy is delivered in collaboration with both our prescribed stakeholders and other individuals/ organisations where relevant, to identify opportunities for reform, to connect services and overcome access barriers. Metro South Health is well positioned to achieve this via the existing leadership and governance arrangements, in place, including representation of First Nations people on the Metro South Hospital and Health Board, the establishment of a Metro South Health Aboriginal and Torres Strait Islander Health Directorate and establishment of an Elders Council. Furthermore, co-design and co-implementation principles will elevate First Nations peoples voice through leadership and engagement with First Nations staff, health consumers, community members, Elders and Traditional Custodians, as well as local service delivery stakeholders. Metro South Health will leverage service delivery partnerships that are working and identify novel ways of providing care that will make the health system more accessible, more connected, and more responsive.

This is a living document and the actions will be reviewed every three years and refined to reflect emerging policies, priorities, and opportunities. New initiatives will be added as appropriate and continually informed by data, needs analyses and community perspectives.

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Metro South Health | First Nations Health Equity Strategy 2022–2025



Our vision for health equity

- » Improved access to and experience of health services for First Nations people.
- » Parity of health outcomes between First Nations people and other residents of South East Queensland.
- » Elimination of institutional and interpersonal racism within the health system.

Our health equity values

- » Partnerships built on trust, mutual respect, transparency, and shared decision making.
- » Accountability to the First Nations Communities who access our services for the delivery of an integrated health service system that harness the capabilities of both Hospital and Health Services and Community Controlled Health Services.
- » Evidence based and community informed health care.
- » Culturally Safe service delivery environments that respect our First Nations employees and clients and are free of racial discrimination.

Priority Area 4 Priority Area 6 Priority Area 1 **Priority Area 2 Priority Area 3 Priority Area 5** Our Actively eliminate racial Increase access to healthcare Influence the social, cultural Deliver sustainable, culturally Strengthen the First Nations Priorities and economic determinants of safe and responsive healthcare Workforce institutional racism within the health 1. Embed cultural safety and 1. Establish models of care that 1. Collaborate with our partners 1. Deliver high quality and safe 1. Contribute to the 1. Establish strong engagement Our deliver care closer to home in to develop and deliver health healthcare to First Nations development of a SEO cultural capability programs structures, communication partnership with Community Actions which are co-designed with promotion and prevention people. regional workforce strategy. processes and cultural Controlled Health Services. First Nations people across programs which target the protocols to ensure First 2. Provide consumers 2. Develop and implement a 2. Improve integration of care by all Metro South Health needs of First Nations people. Nations people are involved information about their rights MSH First Nations Workforce strengthening the interface Directorates. in co-designing the way 2. Ensure First Nations people Strategy that leverages the and feedback mechanisms between primary, community health services are planned 2. Embed First Nations voices have access to preventative that enable them to report regional strategy. and secondary care. and delivered in Metro South public health interventions. their experiences of healthcare in corporate governance and 3. Ensure the First Nations 3. Work with Community Health. in Metro South Health. decision-making. Controlled Health Services 3. Collaborate with partners to Workforce is supported 2. Develop action plans by cultural models of 3. Ensure service improvement develop a regional response 3. Develop mechanisms to and other primary care to ensure Metro South providers to improve to address the determinants activities are oversighted by improve completion rates supervision, mentoring, Health embeds a discharge following a hospital both clinical and cultural of health. of First Nations status and peer support. admission. consolidated approach to governance arrangements. identification across all patient the implementation of the 4. Improve local engagement and systems. National Safety and Quality partnerships between Metro South Health, the community, Health Standards (NSQHS). community controlled 3. Build on and replicate health organisations and effective service delivery other stakeholders to address partnership models already identified needs and service established in South East gaps. Oueensland. In working towards achieving » Decreased potentially avoidable deaths. » Increased proportion of First Nations people receiving face-to-face Our » Increased proportion of Aboriginal and Torres Strait Islander babies born to community follow up within 1-7 days of discharge from an acute mental Health Equity for First Nations peoples, Metro South Health health inpatient unit. Measures First Nations mothers and non- Aboriginal and Torres Strait Islander mothers with healthy birthweights. » Increased proportion of First Nations people completing Advance Care will contribute to reporting » Sustain a decreased rate and count of First Nations suicide deaths. against measures in the South planning. » Increased proportion of First Nations adult patients on the general care » Annual (year-on-year) increased First Nations workforce representation to East Queensland First Nations dental waitlist waiting for less than the clinically recommended time. demonstrate progress towards achieving workforce representation at least Performance Framework and commensurate to the local Aboriginal and Torres Strait Islander population. » Elective surgery-increased proportion of First Nations patients treated will align reporting to the statewide key performance within clinically recommended time. » Increased proportion of Aboriginal and Torres Strait Islander people who had their cultural and spiritual needs met during the delivery of a healthcare indicators noted here: » Specialist outpatient-decreased proportion of First Nations patients waiting service (inpatient PREMS survey). longer than clinically recommended for their initial specialist outpatient appointment.

Our plan