



Government of **Western Australia**  
Department of **Health**

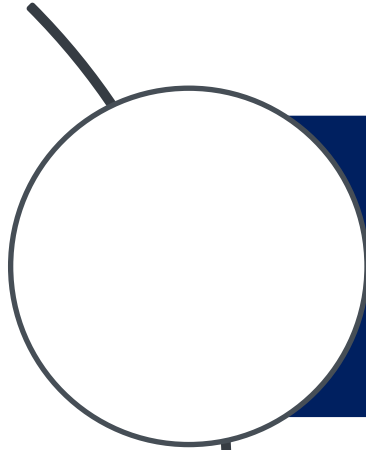
# Clinical Senate

April 2019

**Dr DJ Russell-Weisz**  
Director General  
Department of Health WA

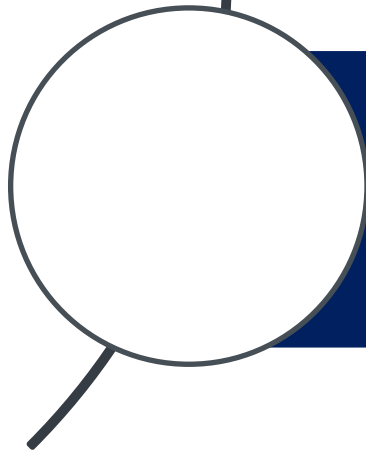


# Today I'll be discussing...



## **Clinical Senate – November 2018**

**Aboriginal health and wellbeing is everybody's business**



## **Today's Topic for Debate**

**The transition of adolescents and young adults with complex conditions from paediatric to adult health services**

# November Clinical Senate – Aboriginal health and wellbeing is everybody's business

## Recommendations

- 5 Endorsed
- 4 Endorsed in Principle



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## ENDORSED Recommendations

### Recommendation 1:

- Enhance the existing mandatory cultural awareness program to explore and address systemic bias and challenge racism.
- The delivery method must be multi-modal, including face-to-face and online approaches, and focus on providing clinicians and staff with dedicated time and space to safely debrief and yarn on their experiences and cultural reflections in providing health care to Aboriginal people.

### Recommendation 2:

- In caring for Aboriginal patients, use multidisciplinary teams that include members of the Aboriginal workforce to better coordinate the patient journey. Encourage increased use of technology (such as telehealth) to increase patient communication and understanding and to minimise the need for patients to move 'off country'.

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## ENDORSED Recommendations

### Recommendation 4:

- Define entry career pathways within the health system by:
  - establishing Aboriginal cadetship pathways in all Health Services to give Aboriginal students work experience in health while completing their studies
  - establishing Aboriginal Graduate Officer 50(d) positions linked to an offer of employment at the completion of the program.



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## ENDORSED Recommendations

### Recommendation 6:

- That targets be set to increase the number of Aboriginal people in our health workforce and ensure that recruitment processes are culturally appropriate by:
  - ensuring that all vacancies across the system are advertised as Section 51 under the *Equal Opportunity Act 1984* (WA)
  - reviewing recruitment processes for Aboriginal applicants to ensure consistency across the system and incorporate more flexible recruitment processes (i.e. review JDFs for lower positions).

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## ENDORSED Recommendations

### Recommendation 9:

- The System Manager and Health Service Providers seek opportunities to work more effectively with other government agencies, non-government organisations and Aboriginal Community Controlled Organisations to better address and monitor social determinants.



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## ENDORSED IN PRINCIPLE

### Recommendation 3:

- In recognising the importance of cultural security, we should expand access to the Patient Assisted Travel Scheme (PATS) to cover the cost of an escort when a patient needs to attend a health service off country.

### Recommendation 5:

- That Health Service Providers develop an Aboriginal workforce action plan to model and plan for the needs, priorities and disciplines of their service. For example: *The Child and Adolescent Health Service Aboriginal Workforce Strategy 2018-2026.*



# November Clinical Senate – Aboriginal health and wellbeing is everybody's business ENDORSED IN PRINCIPLE

## Recommendation 7:

- Data for Discharge Against Medical Advice (DAMA), Take Own Leave (TOL), patient experience and clinical outcomes for Aboriginal people must be made available to clinical teams, units and services. Health Service Providers (HSPs) should establish processes to undertake quality improvement responses linked to this data that recognise cultural safety as a way to build the capacity and understanding of the workforce.



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## ENDORSED IN PRINCIPLE

### Recommendation 8:

- The System Manager initiates two specific reforms related to rural and remote clinic emergency services, namely:
  - investment to enable all rural and remote clinics be provided with the Emergency Telehealth Service (ETS) model (i.e. for the ETS model to go beyond just provision into regional hospitals so as to service all remote clinics in WA Government funded or not).
  - a centralised Emergency Service coordination centre for stabilisation, retrieval and evacuation of a patient from any remote clinic, pre-clinic and into hospital care i.e. Coordination of Royal Flying Doctor Service and St John Ambulance

# Today's Clinical Senate

## The transition of adolescents and young adults with complex conditions from paediatric to adult health services

***WA Youth Health Policy 2018 – 2023***

Strong body, strong minds – stronger youth

