



Winnunga Nimmityjah Aboriginal Health Service

Planning and Delivering Services to Address Entrenched Disadvantage in the Aboriginal Community

December 2016

Winnunga Nimmityjah Aboriginal Health Service (Winnunga AHS)

Planning and Delivering Services to Address the Entrenched Disadvantage in the ACT Aboriginal and Torres Strait Islander Community

Key Points

Context of the 2017-18 Budget Submission

- The social and economic outcomes for Aboriginal and Torres Strait Islander peoples in the ACT remain significantly below the non-Indigenous population, as measured through a range of indicators¹.
- While compared to the national averages, the outcomes may appear better. However, they mask the relative disadvantage experienced by the Indigenous community within the ACT.
- The disadvantage is persistent, and in some cases, worsening over time. For example, the proportion of Aboriginal and Torres Strait Islander children who are developmentally vulnerable remains almost double the rate of non-Indigenous children; child removal rates for out of home care in the ACT has been increasing and is the second highest of all the States and Territories; Indigenous incarceration rates have been increasing; school attendance rates for Aboriginal and Torres Strait Islander students remain markedly below the non-Indigenous students; learning outcomes have been declining with an increasing gap between Indigenous and non-Indigenous students in a number of learning areas; avoidable hospitalisation rates for some conditions are significantly higher for Aboriginal and Torres Strait Islander children.
- Notably, there was a death in custody of an Aboriginal young man in 2016. While the Coronial Inquest is still ongoing, an inquiry by Philip Moss found failures across several government agencies and systems.
- Such outcomes and failures should not be acceptable in any community, and especially, in an affluent community with strong financial and economic position, and without the challenges of remoteness.
- Governments' policy is difficult to assess. Apart from the national commitment to 'closing the gap', there is no overarching strategy to address Aboriginal and Torres Strait Islander disadvantage, or a policy for Indigenous service delivery.
- Expenditure by the ACT Government on services to the Indigenous population is approximately \$35,300 person, and more than three times the expenditure per person on the non-Indigenous population². The relative outcomes highlight the ineffectiveness of the expenditure.
- Implicit service delivery policy is through mainstreaming of services. Of the \$230 million ACT Government expenditure on services, more than 91 percent was on mainstream

¹ *Overcoming Indigenous Disadvantage: Key Indicators 2014*; Steering Committee for the Review of Government Service Provision; Commonwealth of Australia (2014).

² *2014 Indigenous Expenditure Report*; Steering Committee for the Review of Government Service Provision; Commonwealth of Australia (2014).

services. Further, of the less than 9 percent of the expenditure on direct services to Indigenous people, only a fraction was through an Aboriginal led and controlled service.

- Service delivery policy and design are contrary to the well-established principle of ‘do it with us, not to us’ and well accepted research that Indigenous led and controlled services are the most effective, indeed the only, means of making any significant improvements in outcomes.
- In this context, the 2017-2018 ACT Budget Submission from Winnunga AHS seeks to establish: (a) some key guiding principles for Indigenous service policy and program design;(b) funding for some priority areas; and (c) government’s engagement and support for a number of strategic programs that will make a significant improvement in the socio-economic outcomes for Aboriginal and Torres Strait Islander people in the ACT.

Key Principles

- Successful policy implementation and quality outcomes can be achieved through the key principles of: (a) Indigenous involvement in policy development and service design; (b) program delivery through well governed Indigenous led and controlled service providers; and (c) services based on a ‘wrap around’ model to support the health, cultural, spiritual and social wellbeing of Aboriginal and Torres Strait Islander peoples and families.
- Winnunga AHS request the ACT Government to adopt these principles for the development of policy, and design of programs for Aboriginal and Torres Strait Islander peoples.

Winnunga Governance Enhancements

- Winnunga AHS has provided continuous service delivery for over 28 years and has a well proven track record. It is a peak representative organisation for Aboriginal people in the Territory, with around 75 percent of the Indigenous population as its clients.
- Winnunga AHS is transitioning from an incorporated association (ACT) to a company limited by guarantee under the *Corporations Act 2001*. This reflects the continuing growth in existing comprehensive primary health services, and the pressures for expanded community services being faced. It also enhances decision making, transparency and accountability.
- The transition to a company under the *Corporations Act 2001* is being undertaken with assistance from PricewaterhouseCoopers (PwC) on a *pro bono* basis. Winnunga AHS is also being supported by PwC in the development and implementation of a suitable governance model that meets the accountability requirements of the legislation and service delivery objectives of Winnunga AHS.

Election Commitments

- Recent ACT elections included a commitment to new infrastructure to service Aboriginal health and community services, at a cost of \$12 million.
- New facilities (on the existing Narrabundah site) will meet the full range of existing and new health and community services required for the Aboriginal community, including existing and projected growth in demand, primary health care, mental health, care and

protection/out of home care, disability services (NDIS), and justice and corrections health.

- This initiative is included in the Parliamentary Agreement. The funding should be included in the 2017-18 Budget, along with a commitment to address all the relevant leasing and planning issues to achieve the delivery of the initiative in accordance with the timeline of the election commitment.

Current Priorities and Initiatives

Current priorities and initiatives are:

- the development of an Indigenous policy and service delivery framework;
- planning for the service needs of the community;
- commencement of a Winnunga AHS led and controlled practice at the University of Canberra campus to deliver holistic health and wellbeing services integrated with teaching and research at the University;
- infrastructure upgrade at the Narrabundah site;
- prisoner health and the human rights compliance of the Alexander Maconochie Centre;
- re-establishment of operations previously provided through the Aboriginal Justice Centre;
- commencement of drug and alcohol residential rehabilitation service at the Ngunnawal Bush Healing Farm;
- restoration of Boomanulla Oval and its return to Aboriginal control and management; and
- disability support services for Indigenous people.

Future Priorities and Initiatives

Future priorities and initiatives are:

- Indigenous housing;
- child care and early childhood development; and
- aged care services for Aboriginal and Torres Strait Islander peoples.

Proposals and Recommendations

1. That a comprehensive Indigenous policy statement should be prepared in consultation with Aboriginal advisory and peak representative bodies, including Winnunga AHS.
2. That a “single point” Indigenous policy and coordination focus be established within ACT Government.
3. That funding of \$12 million be allocated in the 2017-18 Budget for Winnunga AHS Health and Community Services purpose built facility.
4. That one-off funding of \$0.3 million and recurrent funds of \$1.56 million be allocated in the 2017-18 Budget for the establishment and operation of a Winnunga AHS practice at the University of Canberra.

5. That the Winnunga AHS lease over the Narrabundah site should be reviewed to provide certainty over ownership, as well as providing greater flexibility in land uses, increased GFA capacity and addressing car parking.
6. That funding of \$1.3 million previously provided for remedial capital works be rechannelled to the new facility, with an initial \$0.3 million allocated for the planning and design for the new building and upgrade of the existing building.
7. That an action plan be prepared in consultation with Winnunga AHS, apart from the range of other stakeholders, to make the Alexander Maconochie Centre human rights compliant in accordance with its original vision.
8. That Recommendation 5 of the Independent Inquiry Report by Philip Moss be implemented through the integration of Winnunga AHS into the provision of health care at the AMC, with the allocation of an estimated \$1.5 million per annum (subject to final negotiations).
9. That the Justice Reinvestment Pilot program be extended by one year.
10. That engagement by the Justice and Community Safety Directorate for the design of the Justice Reinvestment Pilot be used as a reference across government directorates.
11. That the operations provided previously by the Aboriginal Justice Centre be re-established through the allocation of additional funds in the 2017-18 Budget.
12. That the operating costs of the Ngunnawal Bush Healing Farm Drug and Alcohol Residential Rehabilitation Service be considered and funded in the 2017-18 Budget to ensure timely commencement of services.
13. That Boomanulla Oval be restored for community use through the commitment of \$3.5 million in the Government's Capital Works Program for 2017-18.
14. That transfer of Boomanulla Oval to Aboriginal control and management on a sustainable basis be progressed as a matter of priority.
15. That funding needs to establish and operate disability support service by Winnunga AHS under the National Disability Insurance Scheme be considered in the 2017-18 Budget.
16. That a Working Group with representation from Aboriginal and Torres Strait Islander representative bodies and service providers be established to: (a) develop an Indigenous housing policy; and (b) develop an action plan for the implementation of the policy.
17. That funding of \$50,000 be provided in the 2017-18 Budget for a feasibility study and cost benefit analysis to establish childcare care services on the current Winnunga AHS site in Narrabundah as part of forward planning for services for Aboriginal and Torres Strait Islander peoples.
18. That funding of \$20,000 be provided in the 2017-18 Budget for a study on the scoping of aged care services as part of forward planning for services for the Indigenous community.

WINNUNGA NIMMITYJAH ABORIGINAL HEALTH SERVICE (Winnunga AHS)

2017-18 ACT Budget Submission

1. CURRENT PRIORITIES AND INITIATIVES

1.1 POLICY AND SERVICE DELIVERY FRAMEWORK

Issues:

Within the ACT Government, there is no overarching policy statement covering all aspects of health and community services to Aboriginal and Torres Strait Islander peoples. There are no Indigenous specific policies for key service areas of high identified need such as housing, out of home care and family support. Organisationally, responses are ad-hoc and principally directed towards mainstream services.

Service delivery policy and design are contrary to well-established principles.

There is no evaluation framework to assess the effectiveness of the various Indigenous specific and mainstream programs.

Wholesale change is necessary in policy development, program design, and service delivery.

Proposals/Recommendations:

1. That a comprehensive Indigenous policy statement be prepared in consultation with Aboriginal advisory and peak representative bodies, including Winnunga AHS.
2. That a "single point" Indigenous policy and coordination focus be established within ACT Government.

1.2 PLANNING FOR SERVICE NEEDS

Demand for Winnunga AHS services has increased significantly, and at a higher rate than for mainstream services. Over the past five years, the number of clients has increased by 22 percent; the number of occasions of service (client contact) has increased at a compound rate of approximately 9 percent per annum; and annual contact per client has been increasing at the rate of 3.7 percent per annum.

Taking into account client morbidity and co-morbidities, client contact needs to increase further to address the unmet need, and to reduce preventable hospitalisations which are and will continue to exert pressures on the hospital system. The demand for the current services is forecast to grow significantly in the coming years. In 2019-20, the number of occasions of service by Winnunga AHS is projected to increase by almost 25,000 contacts – from around 46,000 in 2014-15.

Master planning is underway to assess infrastructure and recurrent resources required to meet these growing needs.

There is a priority for new infrastructure and resources across Canberra, including Belconnen and Tuggeranong for which government support will be required.

Business cases will be prepared for each new service opportunity, for consideration by the Government.

1.3 UNIVERSITY OF CANBERRA PRACTICE

Issues:

Currently, work is being progressed, in collaboration with ACT Health and the University of Canberra (UC), to develop a new service and teaching facility as part of the new hospital complex at the University. The introduction of an Aboriginal Community Controlled Health Service to be co-located within a university, will be the first of its kind nationally.

The Winnunga AHS clinic at the UC will not only provide culturally appropriate and safe services to some 400 Indigenous students at the Campus, but also provide increased access to culturally safe health care for Indigenous people in Belconnen and Gungahlin. There are also potential benefits to both support and draw on the teaching and research effort at UC. This indeed was the main motivation for locating the new Northside Public Hospital at the UC Campus.

The benefits of Winnunga AHS services to the Indigenous community, and for the mainstream acute services in avoiding costly admissions, have been well recognised. There is a strong case for ACT Government support on social policy as well as on financial grounds.

A suitable building at the UC campus has been identified. One-off establishment costs, net of the costs agreed by UC to be absorbed, are estimated at \$0.3 million. Operating costs, net of Medicare income, are estimated at \$1.56 million per annum.

Proposals/Recommendations:

3. That one-off funding of \$0.3 million and recurrent funds of \$1.56 million be allocated in the 2017-18 Budget for the establishment and operation of a Winnunga AHS practice at the University of Canberra.

1.4 NARRABUNDAH LEASE AND INFRASTRUCTURE PRIORITIES

Issues:

Winnunga AHS's current lease at Narrabundah does not allow for the service changes required, nor does it meet the existing and new demands for services on site.

During the 2016 election the Government supported a new purpose built facility, at a cost of \$12 million. This commitment was based on Winnunga AHS's concept planning across the Narrabundah site.

The Government had previously provided \$1.3 million in 2015 towards remedial capital works. These funds should be rechannelled to the new facility, with an initial \$0.3 million allocated for planning and design for the new building and upgrade of the existing building.

High growth rates support additional health and community facilities across Canberra, with priority for new infrastructure and staffing in Belconnen and Tuggeranong.

Proposals/Recommendations:

4. That funding of \$12 million be allocated in the 2017-18 Budget for the Winnunga Nimmityjah Aboriginal Health and Community Services facility.
5. That the Winnunga AHS lease over the Narrabundah site be reviewed to provide certainty over ownership, as well as providing greater flexibility in land uses, increased GFA capacity and addressing car parking.
6. That funding of \$1.3 million previously provided for remedial capital works be rechannelled to the new facility, with an initial \$0.3 million allocated for the planning and design for the new building and upgrade of the existing building.

1.5 JUSTICE AND CORRECTIONS

Issues:

Incarceration rates for Indigenous people remain high in the ACT, and in fact have increased rather than decreasing in accordance with the Government policy.

Following the Aboriginal death in custody in the Alexander Maconochie Centre (AMC), the Independent Inquiry Report by Philip Moss concluded that the claim so commonly made about the AMC being human rights compliant cannot be made in good faith³. This should be addressed as a matter of priority, and a comprehensive plan of action be prepared in consultation with Winnunga AHS, to establish the prison in accordance with its original vision.

Specifically, the Inquiry Report has recommended that Winnunga AHS be integrated into the provision of health care at the AMC, in order to introduce its holistic model of care to Indigenous detainees⁴.

Preliminary estimates of the costs of introducing the 'Winnunga AHS Model of Care' at the AMC are \$1.5 million per annum, which will be subject to refinement. The net budget costs will be lower, taking into account following the reallocation of the existing funding for prisoner health services.

Winnunga AHS is currently engaged with the Directorate of Justice and Community Safety in developing and implementing a pilot on Justice Reinvestment. The pilot is for a period of one year. For a reasonable assessment of measurable outcomes for the families participating in the pilot, Winnunga AHS proposes that the pilot be extended by a further one year.

Winnunga AHS also proposes that this engagement and program design be considered as a reference by other ACT Government Directorates.

The Aboriginal Justice Centre (AJC) was closed some years ago, with its funding transferred to the Aboriginal Legal Service. An AJC has an important role, separate from legal representation, in improving the justice and correction outcomes for the Indigenous

³ Paragraph 12.8.19; *"So Much Sadness in our Lives": Independent Inquiry into the Treatment in Custody of Steven Freeman*; ACT Government (2016).

⁴ *ibid*; Recommendation 5.

community, which by all measures is overrepresented in this system. Winnunga AHS requests the Government to re-establish the operational functions of the AJC.

The Aboriginal Legal Service (ALS) is under pressure. The re-establishment of an AJC should be through the allocation of additional funds, and not through the reallocation of funding from the ALS.

Proposals/Recommendations:

7. That an action plan be prepared in consultation with Winnunga AHS to make the Alexander Maconochie Centre human rights compliant in accordance with its original vision.
8. That Recommendation 5 of the Independent Inquiry Report by Philip Moss be implemented through the integration of Winnunga AHS Model of Care into the provision of health care at the AMC, with the allocation of an estimated \$1.5 million per annum (subject to final negotiations).
9. That the Justice Reinvestment Pilot program be extended by one year.
10. That engagement by the Justice and Community Safety Directorate for the design of the Justice Reinvestment Pilot be used as a reference across government directorates.
11. That the Aboriginal Justice Centre's operating functions be re-established through the allocation of additional funds in the 2017-18 Budget.

1.6 NGUNNAWAL BUSH HEALING FARM

Issues:

Winnunga AHS and ACT Health are currently settling the arrangements for the establishment and operation of the Ngunnawal Bush Healing Farm Drug and Alcohol Residential Rehabilitation Service. Priority is to open the facility to clients as soon as practicable – currently expected to be around July 2017.

The long term management arrangements are yet to be negotiated between Winnunga AHS and ACT Health. The operating costs of the service will be established following the formal endorsement of the Model of Care and its costing.

The cost estimates will be provided during the 2017-18 Budget process. Nevertheless, Winnunga AHS requests that adequate capacity and flexibility be provided in the ACT Health's budget to enable timely commencement of the service.

Proposals/Recommendations:

12. That the operating costs of the Ngunnawal Bush Healing Farm Drug and Alcohol Rehabilitation Service be considered and funded in the 2017-18 Budget to ensure timely commencement of services.

1.7 BOOMANULLA OVAL

Issues:

A single select Request For Tender (RFT) process is currently being negotiated between Winnunga AHS and the Government, covering the future ownership and management of Boomanulla Oval.

Boomanulla Oval has been closed for over two years, is in a state of total disrepair, and is unsafe. Costs to restore the oval and facilities are estimated at \$3.5 million.

Priority is for the facility to be reopened for community use as quickly as possible. Restoration should be undertaken by the Government and prior to handing the site to Winnunga AHS for day to day and longer term sustainable management.

Longer term proposed changes will require a 99 year lease, and support to changes to land uses and a Territory Plan Variation.

Proposals/Recommendations

13. That Boomanulla Oval be restored for community use through the commitment of \$3.5 million in the Government's Capital Works Program for 2017-18.

14. That transfer of Boomanulla Oval to Aboriginal control and management on a sustainable basis be progressed as a matter of priority.

1.8 DISABILITY SERVICES

Issues

The Indigenous population has a relatively higher incidence of disability. The introduction of the National Disability Insurance Scheme (NDIS) provides an opportunity to integrate health care and disability support services through Winnunga AHS's Model of Care.

A large proportion of Aboriginal people with disability are likely to be existing Winnunga AHS clients, hence Winnunga AHS's involvement will ensure that clients are able to access disability support in a trusted and culturally safe environment which is cognisant of spiritual, cultural, mental and physical health needs.

Winnunga AHS received \$50,000 to scope the staffing and system requirements for its establishment as a provider of NDIS services. This work is currently being further enhanced and expected to be completed in January 2017. At this stage, it is clear that payments for client services will be insufficient to establish the service. It is understood the Government has allocated \$12 million for community sector organisations' business transition to NDIS services.

Following the preparation of the business case, consideration of Winnunga AHS's funding needs to establish and operate NDIS services will be required through the 2017-18 Budget process.

Proposals/Recommendations:

15. That funding to establish and operate disability support services by Winnunga AHS under the National Disability Insurance Scheme be considered in the 2017-18 Budget.

2. FUTURE PRIORITIES AND INITIATIVES

2.1 INDIGENOUS HOUSING

Issues:

Relatively, a higher proportion of Indigenous families are in public housing compared to non-Indigenous families. Besides housing, clients have service needs across a number of areas. Government's policy of mainstreaming housing services is not geared towards meeting the service needs of families which will be best met by an Aboriginal led and controlled service provider, namely Winnunga AHS.

Indeed, this is the direction adopted by other jurisdiction across Australia with financial and service capacity building initiatives, and large scale transfers of housing stock to Indigenous housing providers.

There is a need to develop an ACT Indigenous housing policy, which should seek to establish an Aboriginal housing provider in the Territory. This arrangement would be underpinned by a transfer of existing housing stock as well as ongoing identification of new land for additional housing supply.

In the ACT, Winnunga AHS is best placed to provide holistic services to families in public housing whom are already likely to be its clients. To this end, Winnunga AHS has been in discussions with Community Housing Canberra (CHC) to establish a partnership that would draw on the respective strengths of both the organisations including client services and property management. The partnership model was proposed in response to request for tender for the housing services for Aboriginal families following the closure of Inanna Inc. That tender was unsuccessful.

An Indigenous housing policy needs to be developed, as matter of priority, with input from and in consultation with key stakeholders. This should be accompanied by an action plan for implementation.

Proposals/Recommendations:

16. That a Working Group with representation from Indigenous representative bodies and service providers be established to:

- a. develop an Indigenous housing policy; and**
- b. develop an action plan for the implementation of the policy.**

2.2 CHILD CARE AND EARLY CHILDHOOD DEVELOPMENT

Issues:

The Australian Early Development Census (AEDC) indicates that across Australia, approximately 21 percent of non-Indigenous children (aged five years) and 42 percent of

Aboriginal and Torres Strait Islander children were developmentally vulnerable in one or more domain. In the ACT, 22 percent of children are developmentally vulnerable on one or more domain and 9 percent on two or more domains.

Aboriginal and Torres Strait Islander children living in Canberra are twice as likely compared to non-Indigenous children to be developmentally vulnerable. In some domains, the proportion of the Indigenous children who are vulnerable is more than three times the rate of non-Indigenous children⁵.

These outcomes highlight the need for a particular focus on early childhood development services for Aboriginal and Torres Strait Islander children. Policies should target specialised child care and early learning programs and facilities tailored for Indigenous children, incorporating holistic assistance and family support programs for parents.

Due to relatively lower incomes, Aboriginal and Torres Strait Islander families are less likely to access mainstream services. Minor investments in early childhood development have significant benefits through reduced future costs and higher productivity later in life.

Based on the reported data, preventable hospitalisations for Indigenous children aged 0 to 4 are up to six times more likely compared to non-Indigenous children. This highlights the scope to improve access to primary care for young children, which in turn should reduce the pressures and costs for the hospital system.

Provision of child care and early development services on the Winnunga AHS site, in close proximity to its comprehensive primary health care services, will improve access to both early childhood development and primary care. This will also provide an opportunity to engage mothers with community group activities organised by Winnunga AHS's Social Health Team, in particular around preventive health and childhood development.

Winnunga AHS proposes to develop a business case for consideration in the 2018-19 Budget process. To this end, it requests funding of \$50,000 for a feasibility study and cost benefit analysis to establish childcare care services on the Winnunga AHS site in Narrabundah.

Proposals/Recommendations:

17. That funding of \$50,000 be provided in the 2017-18 ACT Budget for a feasibility study and cost benefit analysis to establish childcare services on the Winnunga AHS site in Narrabundah as part of forward planning for services for the Indigenous community.

2.3 AGED CARE

Issues:

The ACT has the opportunity to be a leader in holistic health and housing care services to ageing Aboriginal and Torres Strait Islander peoples.

Such facilities can be accommodated through wider access to additional land at the Narrabundah site (identified in Winnunga AHS's concept planning at Narrabundah), along with support for appropriate facilities infrastructure.

⁵ Table 6A8.1; *Overcoming Indigenous Disadvantage: Key Indicators 2014*; Steering Committee for the Review of Government Service Provision; Commonwealth of Australia (2014).

Development of the business case is targeted for a year following the commissioning of the new purpose built facility. At this stage, Winnunga AHS requests \$20,000 in the 2017-18 Budget for a study on the scoping of aged care services.

Proposals/Recommendations:

18. That funding of \$20,000 be provided in the 2017-18 ACT Budget for a study on the scoping of aged care services as part of forward planning for services for the Indigenous community.