

ABORIGINAL HEALTH COUNCIL OF WESTERN AUSTRALIA (AHCWA) SUBMISSION



DEPARTMENT OF COMMUNITIES SUPPORTING COMMUNITIES PROGRAM – CONSULTATION

Introduction

The Aboriginal population of Western Australia (WA) represents the third largest in Australia, with Aboriginal people making up just fewer than 4% of the WA population.¹ WA covers a large area and the Aboriginal population is geographically dispersed. Access to a range of community based health, wellbeing and other social services is inconsistent across the State.

The Aboriginal Health Council of Western Australia (AHCWA) is the peak body for the 22 Aboriginal Community Controlled Health Services (ACCHS) in WA. The ACCHS are located across geographically diverse metropolitan, rural, remote and regional locations. ACCHS represent the most effective model of comprehensive primary health care for Aboriginal people.² ACCHS are in a unique position to identify and respond to the local cultural, health and other needs of the Aboriginal communities of WA. ACCHS respond to a complexity of health, early intervention and prevention, and social and emotional wellbeing issues across the lifespan.

AHCWA exists to support and act on behalf of our 22 Member ACCHS, actively responding to the individual and collective needs of AHCWA member services. AHCWA is established under a constitution and is supported by strong governance framework, including a Board comprising representatives from across member services. At the National level, AHCWA is represented on the Chief Executive Officer Network of the National Aboriginal Community Controlled Organisation.

The principal vision of AHCWA is for Aboriginal people in WA to enjoy the same level of health and wellbeing as all Western Australians. AHCWA asserts that Aboriginal leadership, self-determination and cultural diversity are integral to achieving this objective.

ACCHS as preferred providers

The 2017 Prime Minister's Report on Closing the Gap emphasised ACCHS as the 'critical providers' in the National effort to close the gaps. The 2017 Closing the Gap progress and priorities report also recommended ACCHS as the preferred providers for the delivery of primary health services to Aboriginal peoples, and the key cultural advisors for the planning activities of primary health networks. The Honourable Ken Wyatt, Commonwealth Minister for Indigenous Health speaking on 12 February 2018 about the findings of the 10th Annual Closing the Gap Report, cited ACCHS as the 'jewel in the crown' of community health service delivery. Consistently, it is ACCHS that lead the way, not mainstream health services, in achieving measurable and sustainable outcomes against the Closing the Gap targets.³

AHCWA is frustrated therefore that the current procurement approaches of Government do not recognise the integral and important role of ACCHS in delivering primary health care and other health and wellbeing services for Aboriginal people and communities. The current proposal is also remiss in this regard, and makes no mention of the need for culturally secure procurement principles.

ACCHS are at the forefront in providing a range of wrap-around health services, directly contributing to effective health and social outcomes within Aboriginal communities. ACCHS require equity of

¹ Australian Bureau of Statistics Census Data, Counts of Aboriginal and Torres Strait Islander Australians, 2011.

² Christine B Phillips et al, *Can clinical governance delivery quality improvement in Australian general practice and primary care? A systematic review of evidence*, Medical Journal of Australia, Vol 193, No 10, November 2010.

³ Panaretto KS et al, *Aboriginal Community Controlled Health Services: Leading the way in primary care*, Medical Journal of Australia, 2014.

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opportunity to the resources of government. Government procurement must therefore incorporate practical elements for ensuring cultural security of procurement.

AHCWA is concerned that ACCHS and other Aboriginal community services will be disadvantaged if the criteria are not culturally secure, are too restrictive or do not consider the unique needs and issues of Aboriginal communities and applicants.

This includes for example where new or emerging services may not have an established evidence base or where an existing service may not, due to resourcing issues, have the required evidence sufficient to address the criteria. Yet are able to establish reliable evidence of other means for demonstrating effectiveness or outcomes.

Issues

AHCWA acknowledges the intention of the Department to achieve standardised procurement under the program. AHCWA is concerned however about the lack of detail and specificity of this broad ambition and in particular, the absence of any detail for ensuring the draft process will incorporate principles of cultural security. AHCWA supports procurement approaches which are accessible and consistent, containing clear eligibility criteria and which reflect culturally secure principles.

Culturally secure procurement

Closing the gaps on disadvantage for the Aboriginal people of Western Australia requires Government to fully appreciate and understand the unique needs and differences across metropolitan, rural and remote Aboriginal communities. It also requires Government to appreciate and mitigate the barriers experienced by ACCHS and communities in gaining equitable access to the financial resources made available through State Government procurement. This includes administrative burden barriers and complexities associated with the lack of cultural security in procurement. The current proposals do not reflect an understanding of, nor provide practical guidance for establishing culturally secure procurement.

AHCWA understands that the Department of Communities (Department) will consult further on the draft procurement process (draft procurement), and proposes that the Department work in partnership with AHCWA to refine the draft procurement.

Government procurement generally

ACCHS report that the current procurement processes of government are not culturally secure, overly complicated, onerous and at times prohibitive in terms of the administrative demands. ACCHS have told AHCWA of procurement experiences where there is limited opportunity for cultural input, and a lack of understanding or appreciation by decision-makers of the cultural barriers and issues which prohibit equity of access to procurement for ACCHS. Eligibility criteria are often restrictive, seemingly tailored for mainstream non-Aboriginal service providers.

These examples of the barriers experienced in procurement, prevent ACCHS from gaining equal access in government procurement, and contribute to increased numbers of non-Aboriginal services delivering services to Aboriginal peoples and communities. Our member services are observing that these approaches are failing Aboriginal people, as mainstream services lack the requisite cultural knowledge and understanding to effectively engage with Aboriginal people and communities.

AHCWA contends that procurement approaches lacking in cultural security, will not provide equity of access for ACCHS and Aboriginal communities to the resources of Government. Procurement that denies ACCHS the opportunity to access the funds necessary to deliver a range of complementary primary health, social and community services will continue to fall short for Aboriginal people, and prevent effective social and policy implementation, and outcomes for communities and for Government.

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The revised procurement process requires a planned, strategic and culturally secure approach to ensure its accessibility for ACCHS, Aboriginal people and communities. Without this approach AHCWA is concerned that the revised procurement will continue to prevent ACCHS gaining access to the resources of Government and as a consequence, disadvantage Aboriginal people and communities in gaining the community services they need.

Cultural security and self-determination

ACCHS are founded on an understanding of the holistic concept of health and social and emotional welling adopted by Aboriginal peoples. Understanding and responding to this holistic view of health ensures that effective health, early intervention and prevention strategies are delivered in Aboriginal communities. It is ACCHS, not mainstream services that are best placed in this regard. ACCHS provide culturally secure primary health care services, directly linking their cultural knowledge of community, cultural awareness and cultural understanding in routine practice in the delivery of services.

The future procurement process must include principles to support ACCHS to not only gain access to the resources of government, but by extension to work alongside their communities in a process of self-determination, to enable the planning and development of culturally responsive delivery of community services.

Barriers to culturally secure service delivery

In AHCWA's experience the agencies responsible for leading the development and implementation of procurement, often adopt approaches without seeking to understand the views and experiences of ACCHS, Aboriginal people or communities. AHCWA has observed procurement lacking in cultural security where a 'one size fits all' approach is adopted. This is culturally insensitive and prevents meaningful contribution from ACCHS, and from Aboriginal people and communities.

The draft process must be culturally secure. The barriers and challenges experienced at the local level by ACCHS when seeking to access procurement must be recognised by the Department and addressed in the draft process.

Summary

Closing the Gaps in Aboriginal disadvantage requires Government, at all levels requires investment in ACCHS for the expansion of a range of services within Aboriginal communities. As the established leaders in Aboriginal primary health care service delivery, ACCHS deliver a range of early intervention, prevention services across the lifespan. ACCHS must be the preferred providers for community services and programs for Aboriginal people.

AHCWA contend that initiatives, like those under the current proposal, will continue to fail Aboriginal people and communities if ACCHS are not the preferred providers, and if Aboriginal leadership and self-determination is not supported and embraced by Governments.

AHCWA strongly supports initiatives that contribute to the improved health status of Aboriginal people and contributes to closing the gaps on disadvantage for Aboriginal people and communities. The program is an important initiative in this regard. AHCWA and our member services are committed to dialogue with the Department to refine and enhance the procurement process. AHCWA will continue to work in partnership with the Department to achieve improved health outcomes for Aboriginal people and communities in WA, on behalf of our member services.

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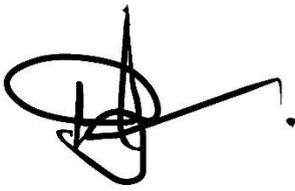
Recommendation

AHCWA strongly recommend that the Department engage in meaningful dialogue with AHCWA to develop the draft procurement process.

AHCWA recommend that the Department take steps to actively engage with ACCHS to obtain a better understanding of procurement implementation issues experienced on the ground by ACCHS.

AHCWA recommend that a greater emphasis is required on ensuring the cultural security of the procurement, including for example mandatory requirement for at least one Aboriginal advisor on all Department procurement evaluation processes. This includes an original advisor from rural, remote and regional locations, in addition to metropolitan based Aboriginal advisor. Particularly where services are intended for delivery in rural, remote or regional locations.

Furthermore, AHCWA suggest that the two-stage process canvassed by the Department, must include culturally secure processes to maximise the opportunity of equitable access for ACCHS and other Aboriginal services in the procurement process.



Des Martin
Chief Executive Office

12 February 2018