Aboriginal Reconciliation Action Plan
2017-19
INNOVATE RAP


Our vision for reconciliation

Alfred Health’s vision for reconciliation is one where all Australians are equal and have equal opportunities, where we trust each other and are moving forward towards a shared vision for Australia.

To achieve this Alfred Health appreciates that as an organisation and as individuals we need to embark on an educational journey towards greater understanding and acknowledgement of past truths about our shared history, respect for Aboriginal culture, and knowing our local community. This education and connection to community will lay the foundations for building respectful, trusting and mutually beneficial relationships.

Greater understanding and stronger relationships are what will enable Alfred Health to provide appropriate and accessible health services and strive for equal health outcomes for all.

Alfred Health is committed to being guided by the Aboriginal voice throughout this journey, whilst driving the actions in this Reconciliation Action Plan as a whole of organisation. The development of the Reconciliation Action Plan (RAP) aligns with the Alfred Health 2016-2020 Strategic plan – our story, purpose, beliefs and strategic goals, as outlined below.

Our story - across our diverse organisation, we value and respect life from beginning to end. We provide treatment, care and compassion to the people of Melbourne and Victoria. Our research and education programs advance the science of medicine and health and contribute to innovations in treatment and care. Through partnerships we build our knowledge and share it with the world.

Our purpose - to improve the lives of our patients and their families, our communities and humanity

Our beliefs

- Patients are the reason we are here – they are the focus of what we do
- Respect, support and compassion go hand in hand with knowledge, skills and wisdom. Safety and care of patients and staff are fundamental
- We work together. We all play vital roles in a team that achieves extraordinary results
- How we do things is as important as what we do
- Excellence is the measure we work to everyday. Through research and education, we set new standards for tomorrow
- We share ideas and demonstrate behaviours that inspire others to follow
**Strategic goals**

- Provide high-quality patient-centred care  
- Lead, innovative specialist care nationally and internationally  
- Engage with our diverse community to promote mental and physical health and wellbeing  
- Promote a healthy, respectful and safe workplace and a skilled, engaged and compassionate workforce  
- Lead excellent, innovative and collaborative health research  
- Deliver a modern and technologically-enabled work and hospital environment  
- Manage our resources and environment sustainably

The implementation of the actions outlined in the RAP also align with the 2016-2020 Patients Come First (PCF) Strategy and plan, which is a sub-plan of the Strategic plan. It can be described as Alfred Health’s ‘road map’ for patient experience and consumer and community participation in service improvements for all patients, including those with diverse or unique cultural, emotional, physical, psychological and social needs and preferences.

**Our business**

Alfred Health is one of Victoria’s major metropolitan health services, caring for people living in southern and bayside Melbourne through our three hospital campuses, numerous clinics and community based services. We offer the most extensive range of statewide services, with 13 programs delivering expert care to people throughout Victoria. Every day we work to provide the best possible health outcomes for our patients and community by bringing together clinical practice with research.

We have a strong focus on education, including undergraduate and post graduate training for medical, nursing, allied health, and support staff through partnerships with Monash, La Trobe and Deakin Universities. We also share important research and development links with research institutes such as Baker IDI and the Burnet Institute, who are our partners in the Alfred Medical Research and Education precinct (AMREP).

We have three hospital campuses and several community services:

**The Alfred** - a major tertiary referral hospital, is best known as having one of Australia’s busiest emergency and trauma centres and the State’s largest Intensive Care Unit (ICU). We are home to statewide services including the Victorian Adult Burns Service and Victoria’s only heart and lung transplant service. The Alfred site also includes the Alfred Centre, a short-stay elective surgery service and medical day-service centre which provides a model of care separating elective short-stay surgery from emergency surgery.

**Caulfield Hospital** - specialises in community services, rehabilitation, geriatric medicine and aged mental health. Many services are delivered through outpatient and community-based programs. The hospital plays a statewide role in rehabilitation services, which includes the Acquired Brain Injury (ABI) Rehabilitation Centre.

**Sandringham Hospital** - is community focused, providing hospital healthcare needs for the local area through emergency, paediatrics, general medicine and outpatient services. Our partner, The Royal Women’s Hospital, provide obstetric and gynaecological services and the hospital works closely with local community healthcare providers.
Community Care - such as the Melbourne Sexual Health Centre, Hospital in the Home (HITH), Geriatric Evaluation and Management (GEM) at Home and a range of psychiatric care, including community care units, headspace services and homeless outreach.

Alfred Health employs a total of 8500 staff and has over 500 volunteers. The number of staff who have identified as Aboriginal at Alfred Health is four (significantly <1% total staff numbers).

Our RAP

Alfred Health is committed to supporting all patients experience health care that supports and values their individual needs and preferences. We also understand the benefits of working collaboratively with patients, families, friends and community to ensure their voice is reflected in service planning, design, implementation and evaluation. This commitment is brought to life through the 2016-2020 Alfred Health PCF Strategy and plan, supporting the individualised patient experience and consumer and community engagement for everyone, including our Aboriginal patients, families and communities.

Eight new pillars underpin this strategy including: access; respect; the team; communication; physical comfort and environment; compassion; family and friends; and being supported to leave our care. These elements are all fundamental to individualised care, inclusivity and health equity.

Alfred Health Executive and Board acknowledge the importance of developing a RAP to inform our local and statewide Aboriginal community that we are committed to the health, safety and wellbeing of all Aboriginal patients and families. The process of developing the RAP has brought a range of staff and Aboriginal community representatives together, including Aboriginal employees and local Aboriginal Elders. This has strengthened relationships within and external to Alfred Health while establishing tangible objectives to implement and measure the effectiveness of the following:

- Creating a welcoming, inclusive and culturally sensitive environment to encourage Aboriginal patients, families and friends to utilise Alfred Health as their preferred health service
- Working in collaboration with local Aboriginal health and community services as well as local Traditional Elders to support and measure the health, safety and wellbeing of all Aboriginal patients who use our services from the local Bayside catchment and broader Victoria for those patients using our many State wide services
- Promote Alfred Health as an inclusive and attractive employer for Aboriginal staff through acknowledgment of the local Traditional Owners and Elders of the land, and through responding and supporting the cultural needs and preferences of individual Aboriginal staff to ensure they feel valued and respected as individuals and as part of the Aboriginal community they may represent

The RAP is considered a sub-plan of the broader Patients Come First (PCF) Strategy and is championed by the Executive Sponsor of the PCF Strategy, the Executive Director Nursing Services, who chairs the Alfred Health RAP working group.

Alfred Health acknowledges all proud members of the Kulin People, including the First People of the Bays (Port Phillip and Westernport) and South East Victoria, the Boon Wurrung, the traditional people and custodians of the lands from the Werribee River to Wilson’s Promontory, where our three hospital campuses are located, including some of our community mental health services.
We also acknowledge the Wurundjeri, the traditional people and custodians of the land from the Yarra River, to Werribee and the Great Dividing Range, the land on which Melbourne Sexual Health Centre sits.

This RAP working group includes the following membership:

- Alfred Health Executive
- Aboriginal Traditional Elder(s)
- Aboriginal Hospital Liaison Officer (AHLO)
- Aboriginal Healthway Pathways Officer
- Carer Services Representative(s)
- Clinical Service Director Alfred Psychiatry or representative
- Community Health Representative
- Consumer Representative(s)
- Department of Health and Human Services (DHHS) Aboriginal employment branch representative
- Director HR and Staff Welfare
- Director Public Affairs
- Lead for Patient Experience and Consumer Participation
- Social Work Manager

By invitation of the Chair, others may attend for all or part of one or more meetings as a resource or in an advisory capacity.

This working group reports to the PCF steering committee, which is the peak operational committee for broader PCF implementation and evaluation. The PCF committee reports to the Executive as well as the Community Advisory Committee (CAC), which is a sub-committee of the Board and provides peak strategic consumer governance for Alfred Health, inclusive of two Board members.

Local Aboriginal Elders are represented in the RAP working group terms of reference (TOR), and have participated in all formal planning workshops for the development of the RAP over the past few years. Acknowledging the time commitment of the monthly meetings and the Traditional Elder’s busy schedules, attendance at the meetings is requested on an as needs basis with more informal liaison occurring in between meetings to seek advice and input, in particular with the local Boon Wurrung Foundation.

Alfred Health staff attend the Local Aboriginal Network (LAN) throughout the year to seek input, advice and direction from Aboriginal community representatives on key initiatives while other staff attend the Victorian Department of Health and Human Services (DHHS) Southern Metropolitan Region Aboriginal Health Committee to monitor the 2015-2017 Koolin Balit plan.
The RAP working group was refreshed in mid-2016 to ensure appropriate representation of staff to influence and enable decision making. Increased senior staff attendance has contributed to a more rapid development of the RAP over the past twelve months.

A facilitated workshop with Reconciliation Australia (RA) in late 2016 led to the development of the draft RAP and enabled significant progress.

The RAP was approved by Alfred Health Executive 17 May and local Traditional Boon Wurrung Aboriginal Elder Carolyn Briggs endorsed the RAP for submission to RA on Friday 19 May 2017.

Note: The term Aboriginal is used inclusively throughout this document to refer to all Aboriginal and Torres Strait Islander peoples.
**Relationships**

*Building strong relationships between Aboriginal Australians is important to our organisation and its strategic goals and objectives of patient centred care, engagement with our diverse community to promote mental and physical health and wellbeing, promotion of a healthy, respectful and safe workplace and a skilled, engaged and compassionate workforce.*

**Focus area:** Ensure that diverse and vulnerable population groups have equitable access to appropriate healthcare and develop and implement the Alfred Health RAP to support this for our Aboriginal patients, families and staff.

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<tr>
<td>1. Maintain an effective RAP Working Group (RWG) to actively monitor RAP development and implementation of actions, tracking progress and reporting</td>
<td>1.1 Develop and maintain RWG to oversee the development, endorsement, launch and ongoing evaluation of the RAP.</td>
<td>Promotion of purpose of RAP and the formal launch for 16 August 2017 as part of Reconciliation Week events from 27 May to 3 June. Formal celebration of NAIDOC week 2 to 9 July, including information promoting the formal launch of the RAP in mid August. Formal community launch of RAP planned for mid August 2017</td>
<td>Executive Director Nursing Services, Executive Sponsor for RAP and Chair RWG Lead Patient Experience and Consumer Participation (PECP) – Executive Officer (EO) RWG</td>
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<td>1.2 Maintain and review the terms of reference (TOR) for the RWG annually, including the purpose, frequency of meetings (minimum twice per year) and ensure the membership includes Aboriginal staff, consumers or community representatives</td>
<td>December 2017 and 2018</td>
<td>Executive Director Nursing Services, Lead PECP</td>
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| 1.3 Monitor and report on RAP implementation at least six-monthly. | Six-monthly progress is reported at the RAP WG and to the PCF Committee. A formal report is presented to the Executive and CAC annually in October | Executive Director Nursing Services
Lead PECP |
| 1.4 Develop and distribute an expression of interest (EOI) as part of the annual review RWG TOR and distribute to key Aboriginal stakeholders and peak bodies to encourage membership of RWG and other key organisational committees such as:  
  - CAC and PCF Committee  
  - Other quality and safety committees  
  - Local Aboriginal Network (LAN) | December 2017 | Executive Director Nursing Services, Lead PECP Director Public Affairs |
<p>| 1.5 Utilise local existing external Aboriginal Advisory Groups and organisations to provide cultural advice and guidance, including the Local Aboriginal Network (LAN) and Boon Wurrung Foundation. | Attendance at monthly LAN (first Tuesday of the month) as initiated by Alfred Health staff and then by invitation | Manager Acute Social Work and AHLOs Carers services, community health and mental health representatives Lead PECP |
| 2. Celebrate and participate in National Reconciliation Week (NRW) by providing opportunities to build and maintain relationships between Aboriginals and other Australians | 2.1 Organise at least one internal event for NRW each year, inclusive of Aboriginal stories and experiences of reconciliation. | 27 May to 3 June, 2018 and 2019 | Executive Director Nursing Services Lead PECP Director Public Affairs |
|  | 2.2 Promote NRW to Alfred Health staff by producing a NRW Pack via internal staff communication strategies such as weekly Newsround, management pack and intranet | 27 May to 3 June, 2018 and 2019 | Executive Director Nursing Services Lead PECP Director Public Affairs |</p>
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<th>2.3 Register our NRW event via Reconciliation Australia’s NRW website.</th>
<th>27 May to 3 June, 2018 and 2019</th>
<th>Lead PECP</th>
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<td>2.4 Support an external NRW event and encourage the RAP WG and other staff to participate to recognise and celebrate NRW.</td>
<td>27 May to 3 June, 2018 and 2019</td>
<td>Executive Director Nursing Services Director Public Affairs</td>
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<td>3. Develop and maintain mutually beneficial relationships with Aboriginal peoples, communities and organisations to support positive outcomes</td>
<td>3.1 Develop and implement an engagement plan with identified Aboriginal stakeholders as part of Alfred Health’s community stakeholder mapping and engagement plan.</td>
<td>December 2017</td>
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<td>3.2 Develop a Guideline for staff including principles for engagement with Aboriginal stakeholders incorporating a list of key internal services and external organisations, services and strategies that can be used as a resource for staff to support consultation and collaboration.</td>
<td>December 2017</td>
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<td>3.3 Development of a dedicated section on the Alfred Health website enabling one central site for information about the RAP, Aboriginal programs including Aboriginal Hospital Liaison Officers (AHLOs), patient stories, Aboriginal employment, culture and linkage to other organisations</td>
<td>December 2017</td>
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<td>4. Raise internal and external awareness of our RAP to promote and embed</td>
<td>4.1 Implement and review a strategy to communicate our RAP to all stakeholders: 4.1.1 Plan a launch of the RAP that includes all sites 4.1.2 Incorporate promotion of the RAP into existing publications, such as Alfred Health quarterly newsletters, intranet, web, social media and other external and staff communications</td>
<td>Promotion of purpose of RAP and formal launch 16 August 2017 as part of RW events from 27 May to 3 June.</td>
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<td>4.1.3</td>
<td>Explore communication strategies and resources to ensure the RAP and progress with Alfred Health’s reconciliation initiatives are accessible to all external stakeholders and the broader community, including video, social media, hospital TV, posters, ‘take home’ hard copy publications and dedicated Alfred Health website page.</td>
<td>Formal celebration of NAIDOC week 2 to 9 July, including information promoting the formal launch of the RAP 16 August. Formal community launch of RAP planned for 16 August 2017 with local Aboriginal Elders, MPs, Aboriginal artists and other key internal and external stakeholders.</td>
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<td>4.1.4</td>
<td>Explore opportunities for email signature blocks for all staff that reflects the purpose of the RAP and acknowledges the traditional people and custodians of the land.</td>
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| 4.2 | Promote reconciliation through ongoing active engagement with all stakeholders, including relevant community groups such as the LAN as well as the Southern Metropolitan Region Aboriginal Health Committee. | August 2019 | Manager Acute Social Work and AHLOs Lead PECP Carers services, community health and mental health representatives |

| 4.3 | Build RAP awareness and education into staff orientation and induction, including information about local Aboriginal history and cultures and how to respectfully ask someone if they are Aboriginal but also respect their choice not to if this is their preference. [Link](http://inwpcp.org.au/resources/closing-the-health-gap-for-aboriginal-and-torres-strait-islander-people/asking-the-question-training-package/) | February 2018 | Director HR Services and Staff Welfare Organisational Development representative |

| 4.4 | Run events throughout the year to promote conversations, relationships and learnings about the RAP’s key focus areas including ‘Everyone has a story campaign’ and ‘Humans of Alfred Health’, Grand Rounds and staff forums, where Aboriginal Elders, patients, families, community representatives and staff can share their own personal stories. | August 2019 | Lead PECP Organisational Development representative Director Public Affairs |

| 4.5 | Engage local Aboriginal artists, students and community | August 2019 | Manager Acute Social Work |
representatives in the development of promotional material for the RAP and ongoing reconciliation initiatives

and AHLO’s Carer services, community health and mental health representatives

Lead PECP
Director Public Affairs
Respect

Respect for Aboriginal peoples is important to our organisation and its core business and engagement with our diverse community to promote mental and physical health and wellbeing. We would like to take pride in our local Aboriginal culture through a greater understanding and appreciation of cultures, lands, waters and histories.

Focus area: All Alfred Health staff, consumers and volunteers are prepared and supported to respectfully meet the individual and diverse needs of our Aboriginal patients and our broader local and State wide Aboriginal communities.

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| 5. Engage employees in cultural learning opportunities to increase understanding and appreciation of Aboriginal cultures, histories and achievements | 5.1 Develop and implement cultural awareness training within the broader PCF Strategy and RESPECT education program for our staff which defines cultural learning needs of employees in all areas of our business and considers various ways cultural learning can be provided, including:  
5.1.1 An assessment of current levels of education and gaps to identify cultural learning requirements of staff  
5.1.3 Provide access to cultural training for all staff in a range of modalities that best meets their needs, such as online, face-to-face and other formal and informal cultural learning opportunities  
5.1.4 Investigate local cultural experiences and immersion opportunities and other educational resources for interested staff to easily access on the Alfred Health intranet and web | December 2018 | Lead PECP  
Director HR Services and Staff Welfare  
Organisational Development representative |
|  | 5.2 Investigate opportunities to work with local Traditional Owners and/or Aboriginal consultants to develop cultural awareness training | December 2017 | Lead PECP  
Director HR Services and Staff Welfare  
Organisational Development representative |
|  | 5.3 Provide opportunities for RWG members, key HR staff and other key leadership staff to participate in targeted cultural training. | December 2018 | RWG membership |
| 6. Create opportunities to develop cultural learning of staff through existing training programs | 6.1 Embed cultural training in relevant existing internal training programs and align with other relevant external benchmarks and drivers, such as National Safety and Quality Health Service (NSQHS) standards, Common Community Care standards and National Mental Health standards via the PCF Strategy | December 2018 | Lead PECP  
Director HR Services and Staff Welfare  
Organisational Development representative  
Clinical Governance Unit (CGU) representative |
| 6.2 Identify key universities, schools and other educational organisations from which staff are recruited and use existing relationships and contacts to regularly discuss their role and opportunities for cultural training of health professionals | December 2018 | Manager Acute Social Work and AHLO’s  
Carers services, community health and mental health representatives  
Director HR Services and Staff Welfare  
Organisational Development representative |
| 7. Build a culturally safe workplace | 7.1 Scope ways to develop a culture of respect amongst staff, including a cultural assessment tool that links with broader work around the PCF RESPECT education project and organisational recruitment processes that includes information about the RAP, our Aboriginal program and our local Aboriginal community | December 2018 | Lead PECP  
Director HR Services and Staff Welfare  
Organisational Development representative |
| 7.2 Scope opportunities to create welcoming and respectful clinical and non-clinical physical spaces through visual displays of artwork, symbols, language and outdoor spaces such as gardens, murals, sculptures and totems | December 2018 | Executive Director Nursing Services  
Lead PECP  
Director of Service Planning |
| 7.3 Develop an Aboriginal garden at The Alfred which is promoted as a space for acknowledgment of local Aboriginal culture, community, history and land as a place for reflection for our Aboriginal and broader hospital community. Investigate the possibility of similar spaces to be developed at our other hospital sites. | December 2017 | Executive Director Nursing Services  
Lead PECP  
Director of Service Planning and Development |
|---|---|---|
| 8. Engage employees in understanding the significance of Aboriginal cultural protocols, such as Welcome to Country and Acknowledgment of Country, to ensure there is a shared meaning | 8.1 Implement and communicate a Guideline for Welcome to Country and Acknowledgment of Country, including key contacts.  
   a. Include Acknowledgement of Country at the commencement of agreed internal and external meetings (as per revised Guideline).  
   b. Invite Traditional Owners into key Executive and Board meetings to explain the significance of Welcome to Country and Acknowledgment of Country.  
   c. Regularly promote the Guideline internally with staff to ensure they are familiar with protocols, including the use of Aboriginal and Torres Strait Islander flags | Completed April 2016  
December 2018  
December 2018 | Executive Director Nursing Services  
Lead PECP |
| 9. Provide opportunities for Aboriginal staff to engage with their culture and communities by celebrating NAIDOC Week | 9.1 Review HR policies and procedures to ensure there are no barriers to staff participating in internal and local external NAIDOC Week community events, and that all Aboriginal staff are enabled to participate with their cultures and communities during NAIDOC Week. | July 2017 | Director HR Services and Staff Welfare  
Lead PECP  
Director Public Affairs |
| 10. Celebrate and recognise Aboriginal dates of significance. | 10.1 Create a shared calendar for key Aboriginal dates of significance throughout the year via the intranet, web and communicate internal and local external events with staff. This includes:  
   - Closing the Gap Day  
   - Reconciliation Week  
   - Sorry Day  
   - NAIDOC  
   - National Aboriginal and Islander Children’s Day | May 2017 | Lead PECP  
Director Public Affairs |
Opportunities

Opportunities for Aboriginal peoples, organisations and communities are important to Alfred Health acknowledging our agreed purpose to improve the lives of our patients and their families, our communities and humanity. Respect, support and compassion go hand in hand with knowledge, skills and wisdom, which includes how we increase and support Aboriginal employment, procurement, professional development and retention.

Focus area: Engage with our diverse community to promote mental and physical health and wellbeing and promote a healthy, respectful and safe workplace and a skilled, engaged and compassionate workforce, which includes increasing and supporting Aboriginal staff and students.

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<td>11. Investigate opportunities to improve and increase Aboriginal employment and education outcomes within our workplace</td>
<td>11.1 Develop and implement an Aboriginal employment, retention and professional development strategy (refer to Attachment B Aboriginal Employment Strategy), which includes: 11.1.1 Consultation with Aboriginal staff and community such as the Boon Wurrung Foundation and others 11.1.2 The feasibility of an employment target of 1-2% 11.1.3 The review of current employment rates, retention rates and staff development processes 11.1.4 The review of the effectiveness of previous strategies 11.1.5 Development of strategies to increase employment, retention and professional development of Aboriginal staff such as internal or external mentoring and debriefing, cultural supervision, access to Aboriginal staff networks and post-employment surveys or exit interviews 11.1.6 Establish relationships with key universities, schools and other educational institutions to enable opportunities for work experience, scholarships, internships and recruitment of Aboriginal students, volunteers and staff 11.1.7 Explore philanthropic funding opportunities to support Aboriginal positions and other resources 11.1.8 Fund dedicated EFT in HR to support a position to lead the development of this plan and implement strategies supporting Aboriginal employment, ongoing support and development to build Alfred Health’s reputation as an employer of choice for Aboriginal staff 11.1.9 Explore all external grants and other opportunities to fund additional positions and resources</td>
<td>August 2017</td>
<td>Executive Director Nursing Services  Lead PECP  Executive Director People and Culture  Director HR Services and Staff Welfare</td>
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<td>11.2</td>
<td>Review current processes around how staff identify as Aboriginal and collect information on our current Aboriginal staff to inform future employment</td>
<td>December 2017</td>
<td>Director HR Services and Staff Welfare</td>
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| 11.3 | Review HR and recruitment procedures and policies and professional development in collaboration with Aboriginal staff and communities to ensure there are no barriers to future applicants participating in our workplace, and formally not identifying as Aboriginal if that is their preference. Ensure Aboriginal media is used to advertise positions, including:  
  - Koori Mail  
  - Indigenous Times  
  - Tracker  
  - Torres News | December 2017 | Director HR Services and Staff Welfare  
Organisational Development representative  
Lead PECP |
| 12.  | Support other organisations and campaigns to achieve positive health outcomes for Aboriginal patient, including research opportunities | December 2017 | Lead PECP  
Lead for Population Health  
Manager Acute Social Work and AHLOs  
Carers services, community health and mental health representative  
Mental health representative |
| 12.1 | Investigate opportunities to support established health promotion campaigns and research and ensure these cater to Aboriginal audiences through partnership and collaboration with Aboriginal stakeholders and communities | December 2017 | Lead PECP  
Lead for Population Health  
Manager Acute Social Work and AHLOs  
Carers services, community health and mental health representative  
Mental health representative |
| 13.  | Investigate opportunities to incorporate Aboriginal supplier diversity within our organisation | December 2017 | Lead PECP  
Strategic Procurement Manager |
| 13.1 | Review procurement policies and procedures to identify barriers to Aboriginal businesses to supply our organisation with relevant goods and services. | December 2017 | Lead PECP  
Strategic Procurement Manager |
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| 13.2 | Develop a list of Aboriginal businesses that can be used to procure goods and services such as catering, education, community based direct care services and others and make it accessible to staff on the dedicated Aboriginal services and resources page on the Alfred Health intranet and website. | December 2017 | Lead PECP  
Strategic Procurement Manager  
Director Public Affairs |
| 13.3 | Develop at least one commercial relationship with an Aboriginal owned business.                       | December 2017 | Lead PECP  
Strategic Procurement Manager |
| 13.4 | Investigate Supply Nation membership.                                                                | June 2017   | Lead PECP  
Strategic Procurement Manager |
| 14.1 | Review the experience of care for Aboriginal patients and families through collaboration with Traditional Aboriginal Elders and communities through a range of culturally appropriate feedback processes such as surveys, interviews, stories, gatherings and others as advised | December 2017 | Manager Acute Social Work and AHLOs  
Carer services, community health and mental health representatives  
Lead PECP |
| 14.2 | Undertake a benchmarking exercise amongst peer health services to review and compare current resourcing for direct care services to Aboriginal patients and families such as AHLOs, carer and community services | June 2017   | Manager Acute Social Work and AHLOs  
Carer services, community health and mental health representatives  
Lead PECP |
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| 15. Establish strong governance around the RAP to ensure effective and sustainable outcomes | 15.1 Link RAP as a sub-plan of the 2016-2020 PCF Strategy and plan and use RAP Working Group to coordinate the development, implementation, evaluation and promotion of the RAP through regular reporting at bi-monthly PCF Committee and annual reporting to the Community Advisory Committee (CAC) and Executive  
15.2 Monitor progress with Alfred Health’s detailed and separate Aboriginal employment, retention and professional development strategy and plan *(Attachment B Aboriginal Employment Strategy)* through regular reports at the RWG via Director HR Services and Staff Welfare | August 2018, 2019 | Executive Director Nursing Services  
Lead PECP  
Director HR Services and Staff Welfare |
| 16. Report RAP achievements, challenges and learnings to RA | 16.1 Complete the RAP Impact Measurement Questionnaire in conjunction with key Aboriginal stakeholders and submit to RA annually.  
16.2 Participate in the RAP Barometer (a national research study that looks at the relationship between Indigenous and other Australians undertaken by RA every two years to explore how we feel about each other, and how perceptions affect progress towards reconciliation and closing the gap). | 30 September, 2018, 2019 | Executive Director Nursing Services  
Lead PECP  
Director HR Services and Staff Welfare |
| 17. Report RAP achievements, challenges and learnings internally and externally | 17.1 Report our RAP achievements, challenges and learnings with key Aboriginal stakeholders internally to the Board and all staff. | September 2018, 2019 | Executive Director Nursing Services  
Lead PECP  
Director HR Services and Staff Welfare |
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<th>18.2 Each year publicly report our RAP achievements, challenges and learnings to our Aboriginal community and broader health service community at the annual meeting, on our website and directly to key stakeholders and relevant organisations. Where possible present this information with key Aboriginal stakeholders.</th>
<th>October/November 2017, 2018, 2019</th>
<th>Executive Director Nursing services</th>
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<th>18. Review, refresh and update RAP</th>
<th>March 2018</th>
<th>Executive Director Nursing Services</th>
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<td>18.1 Liaise with RA to develop next RAP based on learnings, challenges and achievements and send draft RAP to RA for formal feedback and endorsement 4 to 6 months prior to the end of this two-year RAP.</td>
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<td>Lead PECP</td>
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**Contact details**

Position: Lead for Patient Experience and Consumer Participation (PECP), Alfred Health
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