



WA Country Health Service

Aboriginal Employment Strategy 2023–2026



A global leader in rural and remote healthcare

Acknowledgements

WA Country Health Service (WACHS) acknowledges the Aboriginal people of the many traditional lands and language groups of Western Australia. It acknowledges the wisdom of Aboriginal Elders both past and present and pays respect to Aboriginal communities of today.

Using the term—Aboriginal

Within Western Australia (WA), the term Aboriginal is used in preference to Aboriginal and Torres Strait Islander, in recognition that Aboriginal people are the original inhabitants of Western Australia. Aboriginal and Torres Strait Islander may be referred to in the national context and Indigenous may be referred to in the international context. No disrespect is intended to our Torres Strait Islander colleagues and community.

Using the term—on country

For the purposes of this document, on country represents a term used by Aboriginal people referring to the land to which they belong and their place of Dreaming.

Definition of cultural security

Cultural security is the provision of programs and services offered by the health system that will not compromise the legitimate cultural rights, values and expectations of Aboriginal people. To be culturally secure, programs and services need to:

- identify and respond to the cultural needs of Aboriginal people
- work within a holistic framework that recognises the importance of connection to country, culture, spirituality, family and community
- recognise and reflect on how these factors affect health and wellbeing.

Please note: The Aboriginal Employment Strategy 2023–2026 may contain images or names of deceased persons.

Photos have been used with written permission. For further information please contact WACHS Communications.

Pictured on the front cover: (from left) Mieharli De Satge-Shaw, All Purpose Orderly at Kununurra Hospital, WACHS Kimberley; Carole Whitby, Therapy Assistant, Mount Magnet Nursing Post WACHS Midwest and Leeann Pedersen Aboriginal Health Officer, Population Health WACHS Midwest.



The artwork featured in this strategy, Ugarla nganhu buujungga nyinamarda, is by WACHS staff member and local Midwest Aboriginal artist, Leeann Kelly/Pedersen. Leeann is a Wajarri/Nhanda woman and comes from a well-known artistic family including her mother and two sisters.

Leeann has been working for WACHS Midwest as an Aboriginal Health Worker since 2017, including in Carnarvon, and is now based in Geraldton. The painting is featured in the WACHS Gnullingoo Mia Residential Care facility in Carnarvon.



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“Waiti (Hello) my name is Lisa Taylor – Aboriginal Liaison Officer for the renal unit at Hedland Health Campus, WACHS Pilbara.
I am here to support my people through the health system.”

“Hospital mob have been really good to us, look out for us and help us out with everything. The hospital does really good work. Kept us informed when there was a wait for pre-admission clinic - I believe due to an emergency case. All the staff have been so good.”

Care Opinion feedback from a client



Denise Ward (pictured above) is an Allied Health Assistant at Kununurra Regional Hospital, WACHS Kimberley.

“I believe it is essential Aboriginal people are employed within the health sector to offer support and guidance,” Denise said.

“Our mob look for our faces, we look for that particular comforting face. It may not be someone you know but it is someone who can relate to struggles and barriers of dialect, which I believe is the biggest issue.

“They are intimidated to talk and think they are not going to be heard correctly so they feel more comfortable having an indigenous worker there to approach.”

“Hi, I am an Aboriginal Elder in the Harvey community and an Indigenous Outreach worker. A local Elder had passed away very recently, my story is more of a respect and a huge thank you to the Harvey Hospital staff for their respect and understanding with regards to culture and dignity shown and given to all family at this sorry time.

Thank-you Harvey Hospital.”

Care Opinion feedback from a client



Message from the Chief Executive



It gives me great pleasure to reaffirm the WACHS Board and Executive's commitment to grow and strengthen our Aboriginal health workforce.

At WACHS, we acknowledge and recognise the importance of placing Aboriginal culture at the centre of health care for Aboriginal people. Our Aboriginal health workforce is essential in providing Aboriginal people with access to timely, culturally safe and secure quality health services. Aboriginal employees play a

vital role in supporting the organisation to 'address disadvantage and inequity', a key priority of the **WACHS Strategic Plan 2019–2024**.

In alignment with the **WA Aboriginal Health and Wellbeing Framework 2015–2030** the **WACHS Aboriginal Health Strategy 2019–2024** details our organisation's approach to improving health outcomes for Aboriginal people in country WA. It recognises that a strong, skilled and growing Aboriginal health workforce across all levels of the organisation is essential.

I'm pleased to report that since the implementation of the **WACHS Aboriginal Employment Strategy 2014–2018**, the number of Aboriginal employees in WACHS has grown by 17 percent. Furthermore, WACHS employs more than 50 per cent of all Aboriginal people employed in WA Health and we have consistently exceeded the Public Sector Commission's Aboriginal workforce targets since 2014.

These achievements are significant and there is still more we can do. This **WACHS Aboriginal Employment Strategy 2023–2026** (the Strategy) reinforces our long-standing vision and commitment to attract, grow and retain our Aboriginal workforce, to improve the health and wellbeing of Aboriginal people through workforce excellence and sustainability.

We are aiming to increase our Aboriginal health workforce from 4.2 percent to the ambitious target of 5.66 per cent, with targets for each region endorsed by the WACHS Board. We are especially keen to grow Aboriginal people into higher level and leadership positions and to increase the numbers of Aboriginal doctors, nurses, midwives and allied health professionals employed in WACHS.

The **WACHS Aboriginal Employment Action Plan 2023–2026** (the Plan) and regional Aboriginal employment action plans contain detailed actions and initiatives to meet this target.

The next four years will also present exciting opportunities for WACHS to embed the key principals of culture and cultural legitimacy across all organisational aspects, under the **WACHS Cultural Governance Framework**.¹

I look forward to working together with the WACHS Executive to achieve the new ambitious targets over the coming years, in partnership with WACHS Aboriginal Health Strategy, People Capability and Culture teams and WACHS Country Health Aboriginal Workforce Committee.

Jeff Moffet

CHIEF EXECUTIVE

WA COUNTRY HEALTH SERVICE

Preamble

The Strategy is underpinned by the **WACHS Strategic Plan 2019—2024** and aligned to the **WA Aboriginal Health and Wellbeing Framework 2015—2030** (Framework). The Strategy builds and expands on past successes from the previous **WACHS Aboriginal Employment Strategy 2010—2024²** and **WACHS Aboriginal Employment Strategy 2014—2018³**.

Increasing the representation of Aboriginal people and increasing their capacity within the workforce will enable WACHS to embed the **WACHS Cultural Governance Framework¹** across all areas of the business.

Since 2018, WACHS has implemented initiatives under the **Aboriginal Workforce Policy 2022⁵**:

- applying Section 51 of the Equal Opportunity Act 1984 to recruitment processes.
- continuing to apply Section 50d of the Equal Opportunity Act 1984 when Aboriginality is a genuine occupation requirement for the position.
- the establishment of employment pathways for Aboriginal people, including but not limited to Aboriginal cadetships, internships, graduate programs and/or traineeships.
- offering employment opportunities to Aboriginal cadets, interns, graduates and/or trainees who complete an Aboriginal employment program, where possible.
- offering graduate positions to applicant Aboriginal nurse and midwife graduates eligible for registration with the Nursing and Midwifery Board of Australia by applying Section 51 of the Equal Opportunity Act 1984.
- offering junior medical officer positions to applicant Aboriginal medical graduates.
- offering employment opportunities to Aboriginal allied health and health science profession graduates by applying Section 51 of the Equal Opportunity Act 1984.

Workforce initiatives to develop and grow Aboriginal people into higher level and leadership positions were implemented resulting in 10 WACHS emerging leaders

completing the First Step Aboriginal Leaders program since 2020, and 18 WACHS Aboriginal employees completing the Aboriginal Leadership Excellence and Development (LEAD) program since 2014.

As of 2021, the employment of Regional Aboriginal Health Consultants (RAHCs) has occurred in all regions. In 2022, the creation of the Senior Aboriginal Health Program Officer to work alongside the RAHCs offers a career pathway and progression. The introduction and integration of the Aboriginal Health Practitioner profession within WACHS over the next several years offers a career progression pathway for established Aboriginal Health Workers and Aboriginal Liaison Officers.

The People, Capability and Culture Directorate (PCC), Aboriginal Health Strategy team, Country Health Aboriginal Workforce Committee (CHAWC) and RAHCs, have worked collaboratively to develop the Strategy and ensure appropriate cultural governance. The Strategy will be implemented through a WACHS Aboriginal Employment Action Plan 2023-2026 (Plan) and monitored by regional action plans.





Dr Catherine Engelke, Duty Medical Officer at Kununurra Hospital, is a Gija woman who has built lifelong ties with the Warmun Aboriginal community in the Kimberley. Her connection to community has proved invaluable during the rollout of COVID-19 vaccinations in the region.

Dr Engelke worked closely with Warmun's council and provided a familiar voice to residents, which helped coordinate vaccine messaging and allowed people to make an informed decision.

"Having that transparency of information from a team that they trust certainly made a difference," Dr Engelke said.

Background

In 2008, the Council of Australian Governments (COAG) committed to working with Aboriginal people to achieve equality in health status and life expectancy between Aboriginal and non-Aboriginal people by the year 2031.

When WACHS began implementing the COAG *National Partnership Agreements (NPAs) for Closing the Gap (CtG) in Health Outcomes* and the *Indigenous Early Childhood Development (IECD)*, the lack of an available Aboriginal health workforce became evident, as did the need to invest in strategies to increase and retain Aboriginal staff to improve health outcomes for Aboriginal people.

In response, WACHS developed and implemented the inaugural **WACHS Aboriginal Employment Strategy 2010–2014**.² The WACHS Country Health Aboriginal Workforce Committee (CHAWC) further consolidated, expanded and enhanced the work launched under this strategy to inform the **WACHS Aboriginal Employment Strategy 2014–2018**.³ WACHS continues to work towards these priorities and build upon the key actions and successes. The WACHS Aboriginal Health Strategy team, CHAWC and People, Capability and Culture team have worked collaboratively to develop this new Strategy.

Department of Health requirements

The **WA Health Aboriginal Workforce Strategy 2014–2024**⁴ and mandatory *WA Health Aboriginal Workforce Policy 2022*⁵ outline the requirements for health service providers (HSPs) to increase and enhance the Aboriginal health workforce across WA Health including clinical, non-clinical and leadership roles. These policies also support the implementation of the **WA Health Aboriginal Health and Wellbeing Framework 2015–2030**⁶ (the Framework), through the mandatory *Aboriginal Health and Wellbeing Policy 2017*⁷ which are referenced under the *Clinical Services Planning and Programs Policy Framework*.

The Framework sets out guiding principles, strategic directions and priority areas to improve the health and wellbeing of Aboriginal people in WA to 2030. It provides a long-term, evidence-based policy framework and is aligned to a range of national and state policies that support better health outcomes for Aboriginal people. 'A strong, skilled and growing Aboriginal health workforce' (p.15), is one strategic direction of the Framework which emphasises building a sustainable, skilled Aboriginal health workforce from entry level to leadership roles, using a variety of career

(Continued ...)

Background (continued)

pathways and employment opportunities to improve health service delivery is critical to improving Aboriginal health outcomes.⁴ The **WACHS Aboriginal Health Strategy 2019–2024**⁸ is aligned to and adopts the strategic directions of the Framework.

Importantly, as described on page 15 of the Framework, ‘Aboriginal people bring to the health sector a diverse range of skills including the ability to break down barriers to access and bring a cultural perspective which help meet the need of Aboriginal people⁵. Critical to the success of growing an Aboriginal workforce is ensuring that our Aboriginal workforce is supported by a culturally safe work environment’.⁴

The *Aboriginal Health and Wellbeing Policy 2017*⁷ ensures a consistent approach is taken across HSPs to address the Framework’s strategic directions and work towards the performance measures and targets for the employment of Aboriginal people. HSPs report annually on these measures as a mandatory requirement.

The Sustainable Health Review

The *Sustainable Health Review: Final Report to the Western Australian Government (2019)*⁹ references the Framework in recommendation 3a to ‘reduce inequity in health outcomes and access to care with a focus on Aboriginal people and families in line with the Framework (p.51). Priorities for workforce implementation include:

- Employment of additional Aboriginal staff, including in leadership positions with priority to increasing the proportion of Aboriginal nurses, allied health professionals and medical practitioners as part of multidisciplinary teams.
- Expansion of mandatory system-wide cultural learning to develop knowledge and understanding of Aboriginal health and to support the growth and culturally competent and responsive health system.



Background (continued)

Legislative requirements under the Equal Opportunity Act 1984 (WA)

WACHS has submitted the Plan to the Director of Equal Opportunity in Public Employment in order to satisfy the legislative requirements of Part IX, Division 3 (s145) of the *Equal Opportunity Act 1984 (WA)*¹⁰ - 'Preparation and implementation of management plans'. Diversity groups included in the Plan are:

- Aboriginal people
- people with disability
- culturally and linguistically diverse people
- women in leadership
- youth (under 25)
- lesbian, gay, bisexual, transgender, and intersex (LGBTI) people.

The Aboriginal employment targets in the Strategy are consistent with those contained in the Plan. For the Aboriginal diversity group, the goals of this Plan correspond to the Strategy's three strategic directions. The specific initiatives and actions are in the Plan only.

Progress on the implementation of these initiatives will be reported annually to the Director of Equal Opportunity in Public Employment as required under the *Equal Opportunity Act 1984 (WA)*, Part IX, Division 3, (s146).¹¹

"I feel that if I share our culture on how our people are in our community then the non-indigenous staff can have a better understanding in how they can help our people when they come to our health services for supports or medical treatment."

Regina Bernard

Indigenous Mental Health Worker

WACHS Kimberley Mental Health and Drug Service

Aboriginal people in the WACHS catchment and the WACHS Aboriginal workforce

Aboriginal people represent 3.8 per cent of Western Australia's total population,¹² however in the WACHS catchment areas a larger percentage of the resident population are Aboriginal at 10.7 per cent (56,894 people).¹³ A similar proportion of regional Aboriginal people (62 per cent) and regional non-Aboriginal people (60 per cent) are of working age between 15 and 59 years.

At September 2022, 4.2 per cent of the total WACHS workforce identified as Aboriginal, equating to 502 Aboriginal staff, with 50 in medical or nursing positions.¹³ Fifty per cent of Aboriginal people were engaged in lower level positions (HSU Level 3 and below).

Recruiting Aboriginal people to professional positions such as medicine, nursing, midwifery and allied health and developing our existing Aboriginal employees is a continued priority and focus to strengthen and grow the Aboriginal health workforce.

In order to increase the percentage of Aboriginal people employed in agencies across the WA Public Sector, the Public Sector Commission (PSC) sets targets to be achieved. For the period 2011 to 2015, the PSC set an Aboriginal workforce target of 3.2 per cent. WACHS surpassed this goal in 2014, with 3.6 per cent of the workforce identifying as Aboriginal.²

For the period 2021 to 2024, the PSC set an Aboriginal workforce target of 3.7 per cent.¹⁴ WACHS had already exceeded this goal by September 2022 when 4.4 per cent of the total WACHS workforce identified as Aboriginal.¹⁴

(Continued ...)

Background (continued)

As a result, the WACHS Board endorsed the ambitious target of 5.66 per cent Aboriginal employment to achieve as part of this Strategy, in acknowledgement that workforce participation rates vary considerably between regions.

The connection between Aboriginal employees and improving outcomes for Aboriginal community is identified in the WA Health Service performance reports, which provide regular performance results against performance indicators that are aligned to the *WA Health Strategic Intent 2015–2020*. In this report, percentage of Aboriginal employees (P4-1) is intended to positively affect Aboriginal patients that discharge against medical advice (P4-2a) or that do not wait in emergency departments at own risk (P4-3a). Throughout WACHS, an Aboriginal patient is nine times more likely to discharge against medical advice and more than twice as likely to leave an emergency department at their own risk.

Reducing Take Own Leave (TOL) events by Aboriginal patients is a priority for WACHS, with rates of Discharge Against Medical Advice (DAMA) reported to WACHS Executive on a regular basis. Monitoring of these events is included in the Plan.

Aboriginal population statistics 2021

WACHS regions	Non-Aboriginal	Aboriginal	% Aboriginal of total population	Not stated
Kimberley	16,096	14,090	46.7%	4,590
Pilbara	37,717	8,022	17.5%	9,295
Midwest	50,765	6,339	11.1%	7,415
Goldfields	42,795	5,081	10.6%	6,361
Wheatbelt	64,177	3,426	5.1%	7,686
South West	172,384	5,330	3.0%	11,039
Great Southern	64,177	3,944	5.8%	4,961
Country WA	448,111	46,232	9.4%	51,347
Metro WA	1,986,237	42,083	2.1%	88,333
WA Total	2,434,348	88,315	3.5%	139,680

Source: Population Statistics – 2021 Census ¹³

Note: Aligned to the Public Sector Commission method of calculating diversity, where Census data has indicated “Not stated”, the data has not been included.



Taya Woods was employed via the Aboriginal Cadetship Program in 2022 and is now working as a Human Resources Support Officer in the Aboriginal workforce area in PCC. Taya aspires to complete study in health sciences and become a health professional. “Through the DoH Aboriginal Cadetship Program, I’ve had the ability to take on a position at WACHS as an employment pathway. Working at WACHS has given me the opportunity to expand my skill set and allowed me to feel I am doing my part to contribute and support the Aboriginal workforce across WACHS,” Taya said.

Snapshot: Aboriginal people and employment in WACHS

WESTERN AUSTRALIA

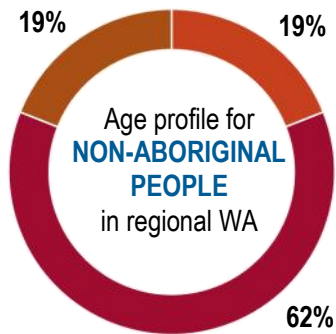
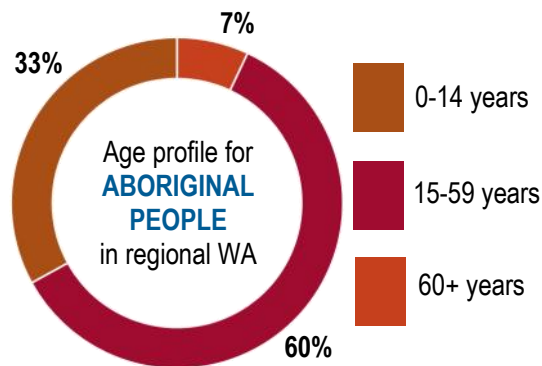


3.8%
of people in
WA are
ABORIGINAL



9.2%
of people in
REGIONAL WA are
ABORIGINAL

AGE PROFILE OF ABORIGINAL PEOPLE & NON-ABORIGINAL PEOPLE IN REGIONAL WA



EMPLOYMENT IN WACHS

4.2%
of the WACHS
workforce identify as
ABORIGINAL



50%
of Aboriginal
people employed
by WACHS are
**HSU LEVEL 3
OR BELOW**

1.8%
of the WACHS
workforce are
**ABORIGINAL
DOCTORS,
REGISTERED NURSES
OR ALLIED HEALTH
PROFESSIONALS**

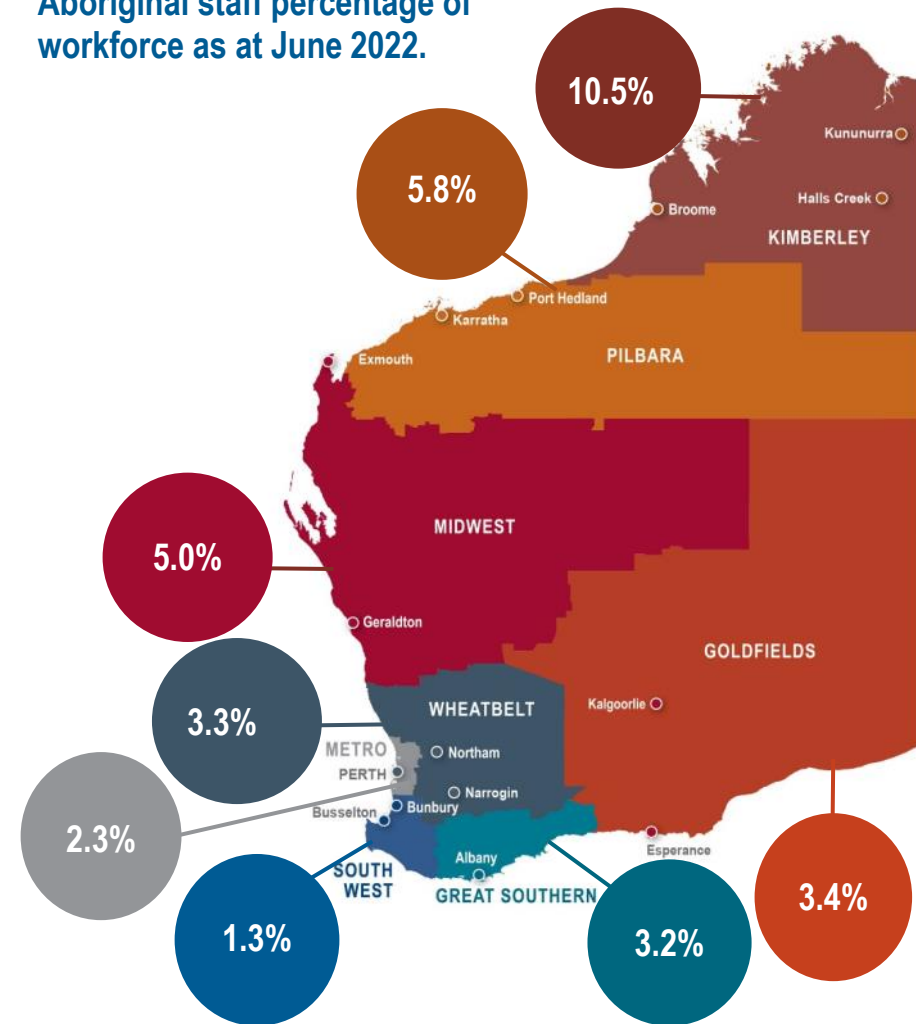
WACHS achieved a
17% ↑
in its
**ABORIGINAL
WORKFORCE**
between
2014 & 2021

52%
of Aboriginal people
employed across
WA Health
work for
WACHS

18
WACHS Aboriginal
employees have
completed the **Aboriginal
Excellence &
Development** program
since 2014

10
WACHS emerging
leaders have completed
the **First Step
Aboriginal Leaders**
program
since 2020

Aboriginal staff percentage of workforce as at June 2022.





Traineeship leads Darelynn to a career at WACHS

Darelynn Ogilvie (pictured left) moved from Perth to Broome in 2017 and soon after, commenced a 12 month traineeship with the WACHS Kimberley regional office. With a Certificate III in Public Administration under her belt, Darelynn soon became an invaluable member of the Broome corporate office working in a number of roles including as an executive secretary, coordinator of property and fleet management and during COVID-19, in administration with the Local Emergency Operations Centre. In late 2020, Darelynn commenced a Certificate IV in Leadership and Management with support from WACHS and was successful in gaining a permanent role as Executive Secretary at the WACHS Broome corporate office. Soon after completing her Certificate IV in 2021, Darelynn was offered an acting role as Aboriginal Health Programs Officer Workforce Development with the WACHS Kimberley Aboriginal Health team. She says it's an exciting role liaising with Aboriginal staff across the region.

So what's Darelynn's advice to Aboriginal people considering a career at WACHS? "Aim high, don't lower your expectations. Have confidence in yourself and anything is possible!"



WACHS Kimberley launches staff cultural learning video

Aboriginal staff are cultural experts, advisors and navigators of their communities. A short video produced by the WACHS Kimberley Mental Health and Drug Service aims to promote the need for Aboriginal culture to be at the centre of care for Aboriginal people. The video introduces new WACHS Kimberley staff to a range of Aboriginal workers who tell their stories.

Titled 'Ask Us' the video is sure to become an important cultural learning tool for health professionals working in the region, providing an introduction to the diversity of Kimberley Aboriginal people and cultures. It aims to enhance relationship building and trust and kick start conversations to promote cultural safety. You can view the Ask Us video [here](#).

Meet the Pilbara's emerging leaders

Highlighting our commitment to growing and developing our Aboriginal workforce, nine current and emerging Aboriginal leaders from the WACHS Pilbara team recently embarked on a new leadership journey.

Participants are taking part in the Aboriginal Leadership Program and will complete a Certificate IV in Leadership and Management at the North Regional TAFE. The opportunity, funded by WACHS, prepares staff to undertake front line management roles in a wide range of organisational and health-industry contexts. In addition to formal training, participants receive holistic, dedicated learning and mentoring support.

Those undertaking the nationally accredited program come from across the Pilbara – from fields including mental health, outpatient care, population health and nursing. Kevin Fitzgerald, Aboriginal Mental Health Worker for Pilbara Mental Health and Drug Service, is currently completing the program and jumped at the chance to be involved.

“The program’s very real focus on leadership means it’s opening doors and empowering me to put what I’ve learned into practice. I’m looking forward to sharing what I’ve learned with my team and my community and helping to teach and educate others as I go,” Kevin said.



Pictured from left: WACHS Pilbara's Liz Pegler, Dylan Box, Dianne Walker, Melanie Bellotti, Jenny Baraga, Helena Murphy, Jubilee Pagsuyuun, Kevin Fitzgerald, John Thomas, Cathy Dalton (TAFE Lecturer), Simone Weetra, Yvette Kelly, and Joel Schreiber (TAFE lecturer).

Award-winning Wheatbelt Aboriginal Health team are helping their community tackle smoking

The WACHS Wheatbelt Aboriginal Health Service's (WAHS) Tackling Indigenous Smoking (TIS) team is improving the health of Aboriginal people by reducing the prevalence of tobacco use through population health promotion activities.

The TIS team has worked closely with local Aboriginal communities in the Wheatbelt to develop and implement activities to tackle smoking. Some of the activities have included working with the community to create the Ngamari Free (Smoke Free) brand, an advertising campaign, merchandise, tobacco brief intervention training, culturally appropriate signage, and hosting Ngamari Free events.

The team are currently focusing on providing Ngamari (smoke) Free education to schools as part of their preventative approach to health promotion. The Kaartdijin Ngamari (tobacco Knowledge) program consists of educational presentations and activities followed by informal yarning. The educational content and activities are tailored to support student's literacy and learning needs. Sessions are currently being held across the region and have already covered schools in Moora, Narrogin, Kellerberrin, Northam and Merredin.

The TIS team also produced the [Drop that Smoke Hip Hop](#) video, which was written, choreographed and filmed by young people from Merredin and Kellerberrin to raise awareness about the harmful effects of tobacco use and second-hand smoke.

At the 2020 WA Rural Health Awards for Excellence the TIS team won the 'Building healthy country communities' category.



The WAHS's Tackling Indigenous Smoking team (pictured from left) Kristy Jetta, Connie Yarran, Zoe Ashby-Deering, Alyssa Thompson, Kelsey Osbourne and below, taking the message into the classroom in Kellerberrin.



WACHS trainees' careers take off



WACHS A/Executive Assistant to the Director, Office of the Chief Executive Emani Iga (left) with WACHS Business Support Officer Aboriginal Health Strategy Mandi Kelly.



Aboriginal Cadet Stephanie Binder works with the Aboriginal Mental Health team.

Mandi Kelly

"I am a proud Noongar yorga (woman) from the South West with family ties from the Great Southern all the way to the Kimberley. I began a 12 month Aboriginal Traineeship through the Public Sector Commission in 2018 at WACHS where I worked as the receptionist as part of the Procurement and Contract Management Directorate. I completed my Certificate III in Government and was successful in being appointed to the receptionist role permanently and have completed secondments with the Human Resources team and Aboriginal Health Strategy team working as their support officer. In 2021, I was appointed as Business Support Officer permanently, supporting the WACHS Director Aboriginal Health Strategy."

Emani Iga

"I am proud Nyikina woman from Derby in the Kimberley. I moved to Perth in 2020 to begin an Aboriginal Traineeship Program with the Public Sector Commission, along with 20 other applicants. I was then based at WACHS Central Office for a year completing units to attain a Certificate III in Government. By the end of the traineeship I received my Certificate III and was offered a permanent position as an administrative assistant in the Office of the Chief Executive. As of now I am A/Executive Assistant to the Director, Office of Chief Executive."

Stephanie Binder

"I first began the Aboriginal Cadetship Program through the Department of Health two years ago with WACHS. My main areas of my placement were the Aboriginal Health Strategy team, Population Health, Aged Care, Allied Health and the Aboriginal Mental Health team. The cadetship allowed me to be paid whilst studying a full-time Bachelor of Social Science degree majoring in community work and human services with Edith Cowan University. This gave me an opportunity to expand on my skills and knowledge in the health system. I have now achieved a certificate of completion in the Aboriginal Cadetship program which I feel fortunate to have based on the experience I have in the field. WACHS has now employed me on a fixed contract while I finish my degree."

As part of our commitment to increasing our Aboriginal workforce, WACHS is offering Aboriginal university students the opportunity to gain paid work experience through WA Health's Aboriginal Cadetship Program.

Cassandra Dempsey

"I was inspired to undertake the placement in the Kimberley as I have family and cultural ties to Broome and the West Kimberley, which has allowed me to understand both the complexities and rewards of working rurally. My goal is to work with Aboriginal communities at a grassroots level to maintain and advocate for their health and wellbeing. Working on-the-ground with the community has given me firsthand experience with health on the frontline and has allowed me to apply the knowledge and experience I've learnt back to my projects in the Perth. I hope to return to regional WA once I graduate.

I'm now based in the Human Resources team, working on Aboriginal workforce initiatives."



Aboriginal cadet Cassandra Dempsey (front right), with WACHS A/Regional Director, Robert Pulsford (front left), Regional Aboriginal Health Consultant, Dave Pigram, and A/Aboriginal Health Programs Officer, Darellyn Ogilvie.

Aboriginal liaison officers provide much needed support to Goldfields patients

Noelene Bourne (left) and Marilyn McKenzie are Aboriginal Liaison Officers (ALOs) with the Allied Health team at Kalgoorlie Health Campus.

Noelene's background is enrolled nursing with aspirations to continue her education in registered nursing in 2022.

Marilyn has been employed as an ALO since 2006. Her passion is to become qualified in linguistics as a certified interpreter in Ngaanyatjarra and Pitjantatjara language to assist Aboriginal patients whose language is their mother tongue.

"As an ALO, my role is an 'in-between' person, liaising with the doctors, nurses, allied health team and Aboriginal patients. We also go into the community, picking up clients and escorting them to their appointments," Noelene said.

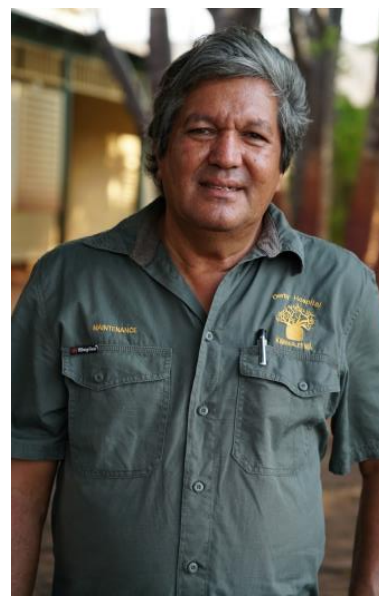
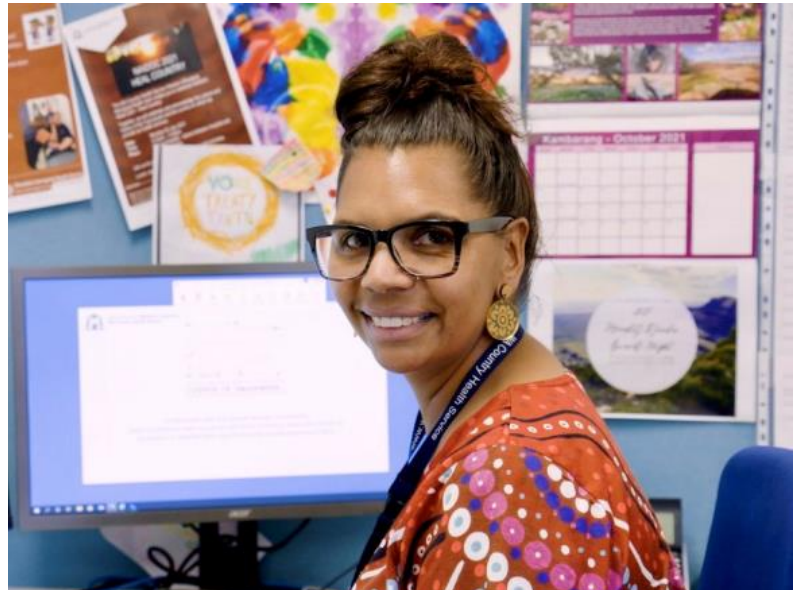
Part of the role is encouraging people to stay in hospital and not to discharge early.

"Being here at the hospital is really important as a support for Aboriginal patients, especially those who are here for a long time, missing family. It has a big impact, seeing us daily. Patients always tell me how good it is to have us here.

"It's especially important for people who come from the Lands, they really miss their families. Marilyn is really good at supporting these patients," Noelene said.



As at September 2022, 4.2 per cent of the total WACHS workforce identified as Aboriginal, equating to 502 Aboriginal staff, with 50 in medical or nursing positions. The current workforce initiatives to attract and retain Aboriginal staff and proposed key actions provide a continued priority and focus on a growing Aboriginal health workforce.



Vision

A global leader in rural and remote healthcare

Mission

To increase the proportion of the WACHS workforce who identify as Aboriginal to improve employment opportunities and health outcomes for Aboriginal people in country WA.



WACHS South West Aboriginal staff, trainees and Aboriginal advisory group members

Strategic Directions

The strategic directions of this Strategy are informed by the priority areas, goals and directions of the *WACHS Aboriginal Employment Strategy 2014–2018*, the *WACHS Aboriginal Employment Action Plan*, the mandatory *Aboriginal Health and Wellbeing Policy 2017* and the *WACHS Aboriginal Health Strategy 2019–2024*. Each strategic direction aligns closely to a specific goal of the Plan as follows:

Strategic Direction 1: Culturally respectful workplaces

Goal 1: An inclusive, collaborative and accountable workplace culture and environment that understands, facilitates and supports the diversity of our people through:

- ✓ leadership
- ✓ cultural learning and awareness
- ✓ collecting and analysing data
- ✓ staff connection and support.

Strategic Direction 2: Attract, inspire and retain

The Plan goals aligning to these strategic directions:

Goal 2: A workplace where, through attraction, recruitment and retention, the diversity of our people reflects the diversity in our regions through:

- ✓ workforce planning and building capacity
- ✓ attraction
- ✓ recruitment and induction.

Strategic Direction 3: Develop and grow our own

Goal 3: Workforce diversity is visible at all levels of leadership and we value, encourage and support building our professional and leadership capabilities, so that all our people can reach their growth potential by:

- ✓ building professional capability
- ✓ building leadership capability.

A complete list of the actions and initiatives under each goal are contained in the Plan.



Nakeesha Miniter (left) is a receptionist and Loretta Avey is an administrative officer at WACHS Great Southern.

Achievements and progress to date

- WACHS has achieved a 17 per cent increase in the Aboriginal workforce between 2014 and 2021.^{14, 3}
- In January 2021, 55 per cent of Aboriginal people employed across the WA Health system were employed in WACHS.¹⁴
- Since 2015, WACHS has supported the Public Sector Commission's Aboriginal Traineeship Program. The 12 month traineeship helps Aboriginal people aged 24 and under, with paid employment in government agencies, while working towards a nationally recognised Certificate III in Government. WACHS has hosted 14 trainees since 2015, nine of whom successfully completed the program; four in Kalgoorlie, two in South Hedland, two in Perth and one in Broome. Five trainees have received permanent contracts of employment – in Kalgoorlie, Broome, South Hedland and two in Perth. One of the trainees in Kalgoorlie received a fixed-term contract and is still employed in WACHS.
- 18 Aboriginal employees from WACHS have completed the Aboriginal LEAD program since 2014 and 10 WACHS emerging leaders have completed the First Step Aboriginal Leaders Program since it commenced in 2020.
- Regional Aboriginal Health Consultant positions have been established at a senior level and filled in each region. All participate on the Regional Executive and take a lead role in Aboriginal cultural learning, employment and workforce development initiatives.
- A DoH Aboriginal workforce dashboard has been developed (example below) and is updated regularly, enabling snapshot and longitudinal analysis of the WACHS Aboriginal workforce.



(Continued ...)

Achievements and progress to date (continued)

- The CHAWC has been established and provides a lead role in driving Aboriginal workforce initiatives across WACHS, in line with WACHS strategic priorities. This group ensures representation from all regions and offers local culturally specific insight and knowledge. In addition to being an advisory group, the CHAWC is committed to performing an operational function to promote and instigate solutions.
- Partnerships are developing with government and non-government employment agencies and registered training organisations to support training pathways and traineeships for young Aboriginal people.
- WACHS is participating in recruiting and employing tertiary students in the WA Health Aboriginal Cadetship Program, which supports tertiary Aboriginal students with an income while completing their qualification.
- Implementation of the WACHS Aboriginal Entry Level Employment Program to support career pathways and development of current Aboriginal employees, and new recruits to start work in entry level positions.
- The Aboriginal Mentorship Program is continuing and is being refreshed to increase engagement and encourage greater rates of participation, with acknowledgement of the need for Aboriginal Cultural Mentors for non-Aboriginal senior managers.

Growing our own Aboriginal workforce

For Aboriginal people, good health is a holistic concept that includes physical, social, emotional, cultural and spiritual wellbeing, for both the individual and the community.¹⁶

Aboriginal employees bring cultural expertise to their work environments and positions. When Aboriginal employees are involved in the care of Aboriginal clients, they receive more supportive and individualised services, which are also of higher quality.

At an organisational level, integrating corporate, clinical and cultural governance is required to create culturally safe and secure work environments for Aboriginal staff, and in turn increase the safety, security and responsiveness of health care services delivered.¹⁷

Dr Elvis Penny at Albany Health Campus takes a patient's blood pressure.



“I just wanted to put in feedback regarding the follow-up calls I receive after any member of my family visits the emergency department (ED) or is admitted to Bunbury Regional Hospital (BRH). We have been discharged from a different hospital many times over the last 18 years and once you're home things get a bit quiet, no follow up until you attend clinic.

Life changes when you have a child with a life-threatening illness, you lose touch with friends, you stop getting invited to things and because we post so much about our lives on social media, there's very little support in the home even by phone calls these days.

So it is really nice to receive that call from our BRH Aboriginal Liaison Officers asking us how our ED visit went, or time in the Paediatric ward. It's just nice to be able to vent and it really is a lovely feeling knowing that someone cares enough to call us and see how we're going. So thank-you for providing this service.” **Care Opinion feedback from a client**

Opportunities

Culturally respectful workplaces

- The WACHS Aboriginal Mentorship Program provides a unique and important opportunity to support our Aboriginal workforce and for our non-Aboriginal staff to engage in cross cultural exchange.
- Approximately 30 per cent of Aboriginal people who reside in the catchment areas of WACHS are young people aged 10 to 24 years.⁸ This is a significant, valuable and vulnerable population within WACHS.

Our organisation strives to provide youth friendly, welcoming and engaging environments and services for young Aboriginal people. WACHS Aboriginal employees are role models for careers in health for young Aboriginal people in regional and remote WA.

There are considerable opportunities for WACHS to engage with young Aboriginal people to encourage ongoing education and career pathways, with the view to growing our own Aboriginal trainees, Aboriginal liaison officers, health workers, health practitioners, nurses, midwives, doctors and allied health staff.

Attract, inspire and retain

- Aboriginal health is everybody's business. All regions have ambitious targets for Aboriginal employment under the Plan. All operational areas have a role to play to meet those targets and ensure Aboriginal specific positions are retained.
- The use of Section 50(d) and Section 51 of the *Equal Opportunity Act 1984 (WA)* provides opportunities to increase the recruitment of Aboriginal people, redesign roles and create leadership opportunities. Aboriginal employees in the front line are vital to influence the delivery of culturally responsive, high quality health care services.
- WACHS is guided by the Public Sector Standards in the recruitment, selection and appointment of its employees. However, within that are opportunities to incorporate improved marketing and reach to the Aboriginal community using flexibility and innovation.

- Offer greater employee job security by reviewing fixed term contracts and casual employee engagements to determine if employees may be eligible for permanent appointment.
- Continuing to support the implementation of equity in recruitment, selection and appointment as fundamentally guaranteed by the WACHS Executive.

Develop and grow our own

- There are many education and employment support agencies that provide funding and programs to assist Aboriginal people and employers. This sector assists Aboriginal people in job readiness and the establishment of entry level positions such as school-based traineeships, full time traineeships, cadet and graduate programs. Utilising and partnering with these agencies will enhance WACHS's human and financial resources in implementing workforce development initiatives.

The relationship between employment and health is complex and interconnected.¹⁶ While education and employment can affect people's health, health can also affect people's ability to participate in schooling and in the workforce.¹⁶ WACHS can play a key role in improving the health of Aboriginal people, which can positively influence rates of school attendance, university completion and workforce participation.

“Aboriginal people and communities across the Kimberley are diverse. We come from a variety of different cultural, personal and historical backgrounds. We bring our own set of unique stories and experiences to the workplace and understand the importance of sharing this with our colleagues.”

David Pigram

Regional Aboriginal Health Consultant

WACHS Kimberley

Governance and next steps

The governance structure of the Plan also applies to the Strategy including:

- roles, responsibilities and accountability for outcomes across the organisation
- monitoring, reviewing and reporting processes
- key action implementation and reporting templates.

Successfully implementing the initiatives and actions for Aboriginal employment in the Plan will contribute to achieving the strategic directions of the Strategy, the **WACHS Aboriginal Health Strategy 2019–2024** and the Framework.

Progress on the implementation of these actions and initiatives towards the performance measures and targets will be reported annually to the:

- Director of Equal Opportunity in Public Employment as required under the Equal Opportunity Act 1984 (WA), Part IX, Division 3, (s146).
- WA Department of Health in accordance with mandatory requirements under the *Clinical Services Planning and Programs Policy Framework*.

Pictured below from left: Wayne Milgin, Aboriginal Health Worker, WACHS Looma Clinic; Matty Taylor, Health Promotion Coordinator, WACHS Kimberley Population Health Unit (KPHU); Tonderai Mashatini, Remote Area Nurse; Ismahl Croft Aboriginal Health Promotion Officer, WACHS KPHU; Chris Hart, Allied Health Manager, WACHS KPHU.



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Rani Randall, Regional Aboriginal Health Consultant
 WACHS Midwest at Geraldton Regional Hospital for
 NAIDOC Week 2021 with Derek Councillor.