Aboriginal Workforce Strategic Framework 2011-2015

Document Number PD2011_048
Publication date 22-Jul-2011
Functional Sub group Personnel/Workforce - Recruitment and selection

Summary
The "Framework" focuses on addressing health workforce skill gaps as well as supporting the economic and social well being of Aboriginal people. The key priorities of the Framework are to:
• Increase the representation of Aboriginal employees to 2.6% across NSW Health;
• Increase the representation of Aboriginal people working in all health professions;
• Develop partnerships between the health and education sectors to deliver real change for Aboriginal people wanting to enter the health workforce and improve career pathways for existing Aboriginal staff;
• Provide leadership and planning in Aboriginal workforce development;
• Provide employment to Aboriginal university graduates in health professions; and
• Build a NSW health workforce which closes the gap in health outcomes between Aboriginal and non-Aboriginal people by providing culturally safe and competent health services.

This policy was updated on 12/8/2011, the only change is to the term 'other public health organisations' where it appeared now reads 'other NSW Health organisations'.

Replaces Doc. No. Aboriginal Employment Strategy (The) [PD2005_120]

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Audience All NSW Health Staff

Director-General Distributed to Public Health System, Divisions of General Practice, Government Medical Officers, Health Associations Unions, NSW Ambulance Service

This Policy Directive may be varied, withdrawn or replaced at any time. Compliance with this directive is mandatory for NSW Health and is a condition of subsidy for public health organisations.

Review date 22-Jul-2015
NSW Health Aboriginal Workforce Strategic Framework 2011 – 2015

Good Health – Great Jobs

PURPOSE

The NSW Health Aboriginal Workforce Strategic Framework 2011 – 2015 (the Framework) focuses on addressing health workforce skill gaps as well as supporting the economic and social well being of Aboriginal people.

The key priorities of the Framework are to:

- Increase the representation of Aboriginal employees to 2.6% across the NSW public health sector;
- Increase the representation of Aboriginal people working in all health professions;
- Develop partnerships between the health and education sectors to deliver real change for Aboriginal people wanting to enter the health workforce and improve career pathways for existing Aboriginal staff;
- Provide leadership and planning in Aboriginal workforce development;
- Tap into the increasing pool of Aboriginal university graduates undertaking health courses; and
- Build a NSW health workforce which closes the gap in health outcomes between Aboriginal and Non-Aboriginal people by providing culturally safe and competent health services.

Aboriginal employees currently make up 1.8% of the NSW health workforce. To achieve 2.6% representation, an increase of a further 1,400 Aboriginal employees is needed by 2015. This is the equivalent of an additional 280 people per year across NSW.

In achieving this target, particular focus will be placed on increasing Aboriginal representation as medical and primary care practitioners, nurses, midwives, service and program managers, Aboriginal Health Workers, administrators, and in leadership roles.

The Framework is a tool to guide NSW Health in meeting objectives to grow the Aboriginal workforce. The Framework is built on key workforce principles and containing strategies that will ensure workforce targets are met within the required timeframe. NSW Health will continue to increase our Aboriginal workforce beyond the target of 2.6%.

MANDATORY REQUIREMENTS

In 2009 the NSW Government agreed to a Whole of Government Aboriginal workforce participation target of 2.6% by 2015, in line with the 2009 Council of Australian Governments (COAG) decision and ongoing state and national reporting requirements. The Framework has been developed with this target as one of its key objectives.

In order to achieve the key objectives a number of Key Performance Indicators (KPI) will be reported against half yearly to measure the Framework’s implementation progress. The NSW Ministry of Health, Local Health Districts and other public health organisations will be required to collect and report on KPIs as listed on page 8 of the Framework.
To meet these aims the NSW Ministry of Health will collaborate with Local Health Districts and other public health organisations to implement planned actions in the areas of recruitment and retention, education and training, and workforce assessment and planning.

IMPLEMENTATION

The NSW Ministry of Health will oversee the implementation of the Framework and will be supported by the NSW Health Aboriginal Workforce Strategic Steering Committee (Steering Committee). The Steering Committee will guide the implementation of the Framework and is made up of representatives of the NSW Ministry of Health, Local Health Districts and other public health organisations. The Steering Committee will exist for the duration of the Framework from 2011 to 2015.

The NSW Ministry of Health will provide reports half yearly to the NSW Health Aboriginal Workforce Strategic Steering Committee.

Local Health Districts and other public health organisations will be required to provide half yearly reports against the key performance indicators which will be presented to the NSW Aboriginal Workforce Strategic Steering Committee. The Steering Committee will provide an annual report for NSW Health in April of each year to the Director General.

Reporting dates for the Key Performance Indicators are set out in Attachment 2.

REVISION HISTORY

<table>
<thead>
<tr>
<th>Version</th>
<th>Approved by</th>
<th>Amendment notes</th>
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<tr>
<td>April 1998</td>
<td>Director-General</td>
<td>Originally issued as Circular 98/23.</td>
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</table>

ATTACHMENTS

1. The NSW Health Aboriginal Workforce Strategic Framework 2011 – 2015: Good Health – Great Jobs
2. Key Performance Indicator Reporting Timetable
Aboriginal Workforce Strategic Framework
2011–2015
## Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Director General’s Commitment</td>
<td>2</td>
</tr>
<tr>
<td>Introduction</td>
<td>3</td>
</tr>
<tr>
<td>Key Outcomes</td>
<td>4</td>
</tr>
<tr>
<td>Aboriginal Workforce Profile – 2011</td>
<td>5</td>
</tr>
<tr>
<td>Respecting the Difference – Aboriginal Cultural Training</td>
<td>6</td>
</tr>
<tr>
<td>NSW Health Aboriginal Workforce Strategic Framework</td>
<td>7</td>
</tr>
<tr>
<td>Key Performance Indicators</td>
<td>9</td>
</tr>
<tr>
<td>Key Priorities, Actions and Outcomes</td>
<td>10</td>
</tr>
<tr>
<td>Key Priorities Mud Map</td>
<td>16</td>
</tr>
</tbody>
</table>
Director General’s Commitment

Acknowledgement of Country

NSW Ministry of Health acknowledges the people of the many traditional countries and language groups of New South Wales. It acknowledges the wisdom of Elders both past and present and pays respect to Aboriginal communities of today.

The NSW Health Aboriginal Workforce Strategic Framework 2011–2015 has been developed within the context of our changing environment and the continued need and opportunity for the NSW Government to contribute to the health and wellbeing of Aboriginal people, their families and communities.

NSW Health is committed to ‘Closing the Gap’ in health outcomes for Aboriginal people in NSW. Through this commitment, we will provide a clear direction for improving Aboriginal health outcomes through a proactive approach in developing and supporting an Aboriginal health workforce.

Priority Aboriginal health issues demand a focus on the recruitment and retention of skilled Aboriginal people across health services to meet the NSW Government’s commitment to achieve 2.6% of Aboriginal staff by 2015 and halve the gap in employment outcomes between Aboriginal and non-Aboriginal peoples.

Our commitment to the Aboriginal health workforce is based on the NSW Health CORE values of Collaboration, Openness, Respect and Empowerment. That is:

- Everyone engaged in providing health care has a valued role and their contributions are respected.
- Enabling the health workforce to gain professional development, access to education and training opportunities, and to be supported in taking a range of career pathways, makes for a more responsive and professional workforce. Empowerment and accountability have to exist at every level in the health system.

Aboriginal people are best placed to determine and define the mechanics of support, assistance and delivery of health needs for Aboriginal individuals and communities. The engagement and support of the Aboriginal workforce is crucial to providing effective health services in NSW.

Dr Mary Foley
Director General, NSW Health
Introduction

The NSW Health Aboriginal Workforce Strategic Framework 2011–2015 (the Framework) aims to increase the Aboriginal workforce across the public health sector in clinical, non-clinical and leadership roles. This in turn will support the economic and social wellbeing of Aboriginal people.

The key priorities of the Framework are to:

- Increase the representation of Aboriginal employees to 2.6% across the NSW public health sector;
- Increase the representation of Aboriginal people working in all health professions;
- Develop partnerships between the health and education sectors to deliver real change for Aboriginal people wanting to enter the health workforce and improve career pathways for existing Aboriginal staff;
- Provide leadership and planning in Aboriginal workforce development;
- Tap into the increasing pool of Aboriginal university graduates undertaking health courses; and
- Build a NSW health workforce which closes the gap in health outcomes between Aboriginal and non-Aboriginal people by providing culturally safe and competent health services.

Aboriginal employees currently make up 1.8% of the NSW health workforce. To achieve 2.6% representation, an increase of a further 1,400 Aboriginal employees is needed by 2015. This is the equivalent of an additional 280 people per year across NSW, from 2011 to the end of 2015.

In achieving this target, particular focus will be placed on increasing Aboriginal representation as medical and primary care practitioners, nurses, midwives, service and program managers, Aboriginal Health Workers, administrators and in leadership roles.

The Framework is a tool to guide NSW Health in meeting objectives to grow the Aboriginal workforce. The Framework is built on key workforce principles and contains strategies that will ensure workforce targets are met within the required timeframe. NSW Health will continue to increase our Aboriginal workforce beyond the target of 2.6%.

To meet these aims, the NSW Ministry of Health will collaborate with Local Health Districts and other NSW Health organisations to implement planned actions in the areas of recruitment and retention, education and training, and workforce assessment and planning.

NSW Health supports the provision of multi-disciplinary services which are culturally safe and competent to meet the needs of all Aboriginal communities. Cultural competence encompasses awareness, knowledge, understanding of and sensitivity to Aboriginal people and their culture.
NSW Ministry of Health has identified key priorities and actions to increase the Aboriginal workforce. Implementation of these actions will lead to a number of key outcomes being achieved over the duration of the Framework.

The key outcomes of the Framework are to:

- Meet the target of 2.6%\(^1\) Aboriginal health workforce by the end of 2015.
- Employ and retain Aboriginal health workforce employees through the implementation of specifically designed Aboriginal identified and/or targeted recruitment and retention processes.
- Ensure the Aboriginal workforce has access to ongoing professional development, education and training opportunities, and clear career pathways.
- Provide strong leadership and innovation to ensure the continuing growth and development of the NSW Health Aboriginal workforce.
- Map the NSW Health Aboriginal workforce by occupation, salary level, location and classification to ensure workforce distribution matches community needs.

This Framework provides a mechanism to assist in planning, prioritisation, target setting, monitoring, and reporting of progress in Aboriginal health workforce capacity building.

The Framework is underpinned by action plans within each Local Health District and other NSW Health organisations. The localised strategies will have Aboriginal workforce targets reflective of the Aboriginal populations within those Districts. Therefore targets may vary from the State target of 2.6%.

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In 2006 there were an estimated 148,178 Aboriginal people living in NSW, comprising just over 2% of the total NSW population and approximately 29% of the total Aboriginal population in Australia. While NSW has the largest number of Aboriginal people of any Australian state or territory, the Northern Territory has the highest proportion of Aboriginal people (32% of the total population) (ABS, 2008).2,3

The Aboriginal population is younger, with around 40% of the population under 15 years of age, compared with 19% of the non-Aboriginal population. The proportion of the Aboriginal population in each 5-year age group decreases with increasing age, whereas in the non-Aboriginal population, there is no decrease until after the age of 45 years. The proportion of the Aboriginal population over the age of 65 years is just over 3%, compared with just over 13% in the non-Aboriginal population. There is also a substantial drop in the size of the Aboriginal population between 10-14 years and 15-19 years, reflecting a relatively high mortality rate among older teenagers.

The Aboriginal population in Australia grew by 13% in the period between the 2001 and 2006 Censuses. Much of this intercensal increase is a ‘natural’ increase which can be explained by demographic factors (births and deaths). Non-demographic factors, such as improvements in Census collection methods and people identified as Aboriginal for the first time, also contribute to the growth.

The NSW Aboriginal Housing Office has produced indicative projections of the Aboriginal population from 2006 to 2021. The Aboriginal population in NSW is projected to increase from 148,178 in 2006 to 199,775 in 2021. In this period, the median age of the Aboriginal population will increase from 20 to 21 years (Khalidi, 2008).

Currently NSW Health has 1,9874 Aboriginal and/or Torres Strait Islander employees including over 51 Aboriginal doctors and 496 Aboriginal nurses. Additionally the number of other Aboriginal health professionals, para-professionals and clinical staff have increased.

Evidence has indicated that the difference in life expectancy is 11.8 years lower for Aboriginal males and 10 years lower for Aboriginal females compared to non-Aboriginal people.4 Infant mortality rates are significantly higher than in non-Aboriginal communities. There is an intrinsic link between employment addressing socio-economic issues and underpinning good health. The growth of the NSW Health Aboriginal workforce will assist in addressing this process.

For more information refer to the following documents:
3 Premier’s Workforce Profile 2009/10.
Respecting the Difference – Aboriginal Cultural Training

Culture and identity are central to Aboriginal perceptions of health. This perception and the social interaction that accompanies it impact on health workforce development, workforce practices, funding, purchasing and planning services.

Managers and staff of health services are responsible for ensuring that their organisations consider the needs of the Aboriginal community in working towards Closing the Gap in health outcomes for Aboriginal people. Provision of cultural education and training programs specific to Aboriginal people is one element of undertaking change within Health Services to facilitate cultural shifts, overcome institutional racism and promote cultural safety\(^5\) within the organisation.

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5 Cultural safety refers to people from any background feeling welcome and understood by an organisation and/or health facility. Culturally safe service delivery is best provided by people from the same cultural group.

The disparity between Aboriginal people’s health status and the mainstream population is a priority for action by the NSW Government.
To deliver our Aboriginal workforce aspirations, our efforts need to be underpinned by an understanding that delivering quality health services to Aboriginal people requires a culturally competent health workforce with appropriate clinical, management and community development skills.

To achieve this, the principles set out below are key to identifying the priorities and actions of the NSW Health Aboriginal Workforce Strategic Framework 2011–2015. These principles align with the *National Aboriginal and Torres Strait Islander Workforce Strategic Framework 2010–2015* (Aboriginal and Torres Strait Islander Health Workforce Working Group, 2011).

### Principles

1. **Cultural respect**: ensuring that the cultural diversity, rights, views, values and expectations of Aboriginal people are respected in the delivery of culturally appropriate health services.

2. **A holistic approach**: recognising that the improvement of Aboriginal health status must include attention to physical, spiritual, cultural, emotional and social wellbeing, community capacity and governance.

3. **Health sector responsibility**: improving the health of Aboriginal individuals and communities is a core responsibility and a high priority for the whole of the health sector. Making all services responsive to the needs of Aboriginal people will provide greater choice in the services they are able to use.

4. **Community control of primary health care services**: supporting the Aboriginal community controlled health sector in recognition of its demonstrated effectiveness in providing appropriate and accessible health services to Aboriginal communities. Supporting community decision-making for self-determination and control of health service delivery ensures Aboriginal people are provided with health services in a holistic and culturally appropriate manner.

5. **Working together**: combining the efforts of government, non-government, community controlled sector, and private organisations within and outside the health sector, and in partnership with the Aboriginal health sector provides the best opportunity to improve the broader determinants of health.

6. **Localised decision-making**: ensuring decision-making about health needs and priorities is driven by local Aboriginal communities so that health needs will be met in a culturally appropriate way and promote collaboration between Aboriginal and other health services.
State/Local Health District/Other NSW Health Organisations decision-making: entails health authorities from different jurisdictions and at all levels to be inclusive and responsive to Aboriginal people in high level decision-making including adherence to the Aboriginal Health Impact Statement process.6

Promoting good health: recognising that health promotion and illness prevention is fundamental to comprehensive primary health care and must be a core component of all health services for Aboriginal communities.

Building the capacity of health services and communities: strengthening the delivery of health services and building community expertise to respond to health needs. This includes effectively equipping staff with appropriate cultural knowledge and clinical expertise, building physical, human and intellectual infrastructure and fostering leadership, good governance and financial management.

Accountability for health outcomes: recognising that accountability is a reciprocal process and includes accountability for health outcomes and the effective use of funds by Aboriginal community controlled and mainstream services to governments and communities. Governments are accountable for providing effective resources through funding support, meaningful policy, planning and service development in genuine partnership with Aboriginal communities.

Partnerships and coordination in policy development, planning, implementation, monitoring and evaluation: recognising the critical importance of the coordinated effort required across all sectors of government, industry and service delivery to achieve Aboriginal health workforce outcomes.

Mechanisms for Accountability: ensuring that planning, prioritising, target setting and reporting are systematically undertaken by all relevant bodies at Local, State and National levels, so that progress in addressing health workforce and health priorities is monitored and reported.

Other State and National Policies

The Framework is informed by the State and National policy contexts within which we operate. Key State and National policies include:

- Making It Our Business – the NSW Aboriginal Employment Action Plan 2009–2012 (State)
- National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework (2010 – 2015) (National)
- National Partnership Agreement on Indigenous Economic Participation, 2009 (National)
- Closing the Gap – Statement of Intent, 2008 (National)
- A Blueprint for Action – Pathways into the health workforce for Aboriginal and Torres Strait Islander People, National Aboriginal and Torres Strait Islander Health Council, 2008 (National).

6 NSW Health Policy Directive PD2007_082
Key Performance Indicators

Progress towards achieving the key outcomes of the Framework will be collected half-yearly and reported by the NSW Ministry of Health for the NSW Health system.

The NSW Ministry of Health will collect and report half yearly on the following:

1. Progress towards the target of 2.6% of Aboriginal health workforce in NSW reported by Local Health District and other NSW Health organisations
2. Percentage Aboriginal workforce by occupation
3. Percentage Aboriginal workforce by salary level (male/female)
4. Percentage Aboriginal workforce by classification
5. Number of Aboriginal Cadetships
6. Number of Aboriginal university graduates employed by classification and location
7. Aboriginal recruitment entries and exits to NSW Health
8. Study leave per Aboriginal staff member by Local Health District and other NSW Health organisations

Local Health Districts and other NSW Health organisations will be required to collect and report half yearly on the following:

9. Number of staff who have completed Aboriginal Cultural Training
10. Number of Aboriginal Traineeships
11. Number of Aboriginal Apprenticeships
12. Percentage vacant Aboriginal identified positions
13. Number of Aboriginal staff by main clinical groups
14. Percentage vacant positions in Aboriginal health programs
15. Percentage Aboriginal staff working in Aboriginal health programs by profession and location
16. Aboriginal Workforce Strategy Implementation Plan
17. Aboriginal Employment Coordinator at Local Health District and other NSW Health organisation level
18. Occasions of training for learning and development for Aboriginal staff
Key Priorities, Actions and Outcomes

Growth

**Key Priority 1: Increase the representation of Aboriginal employees to 2.6% across the NSW public health sector.**

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<tr>
<th>Outcome</th>
<th>Key Performance Indicators</th>
<th>Principles</th>
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<tbody>
<tr>
<td>Meet the target of 2.6% Aboriginal health workforce by the end of 2015</td>
<td>1, 2, 3, 4, 5, 6, 7, 10, 11, 13</td>
<td>1, 2, 5, 6, 7, 9, 10, 11, 12</td>
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<tr>
<td>Increased number and proportion of Aboriginal people working across all the health professions achieved through appropriate recruitment and retention strategies</td>
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**Actions**

To increase the numbers of Aboriginal people entering and remaining in the health workforce across all levels, the NSW Health system will:

1.1 Identify and implement initiatives that create sustainable long-term employment and optimise the retention of Aboriginal people in all NSW Health organisations

1.2 Develop state-wide Aboriginal workforce recruitment resources to support effective attraction, selection and induction into the workplace

1.3 Fill funded existing vacancies identified in Local Health District Aboriginal health workforce action plans

1.4 Fill new funded positions to support initiatives in National Partnership Agreements

1.5 Realise opportunities in the Healthcare assistant workforce including assistant-in-nursing roles and enrolled nursing cadetships

1.6 Implement proven retention programs including mentoring and support, networking, employment conditions and re-connecting with former Aboriginal staff

1.7 Foster a coordinated approach to Aboriginal health workforce development

1.8 Review and streamline employment conditions for designated Aboriginal employment categories
Collaboration

Key Priority 2: Increase the representation of Aboriginal people working in all health professions.

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<thead>
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<th>Outcome</th>
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<tr>
<td>Employ and retain Aboriginal health workforce employees through the implementation of specifically designed Aboriginal identified and/or targeted recruitment and retention processes</td>
<td>1, 2, 3, 4, 5, 6, 7, 10, 11, 13</td>
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<tr>
<td>Principles</td>
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<td>1, 2, 5, 6, 7, 9, 10, 11, 12</td>
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**Actions**

To increase the number of Aboriginal people working in all health professions the NSW Health system will:

2.1 Strive to create sustainable long-term employment to optimise the retention of Aboriginal people in the health workforce

2.2 Develop flexible recruitment programs to attract Aboriginal people to health careers and locations to maximise health services to Aboriginal communities

2.3 Actively pursue the employment of Aboriginal people especially in expanding services and the redesign of clinical services

2.4 Actively target new health professional graduates for employment in the NSW public health system

2.5 Explore the options provided through National Registration and Accreditation of Aboriginal Health Practitioners to expand the roles of Aboriginal Health Workers

2.6 Support and encourage Aboriginal employees occupying ‘identified’ positions to pursue career development opportunities in non-identified positions
### Partnerships

**Key Priority 3: Develop partnerships between the health and education sectors to deliver real change for Aboriginal people wanting to enter the health workforce and improve career pathways for existing Aboriginal staff.**

**Outcome**
Ensure the Aboriginal workforce has access to ongoing professional development, education and training opportunities, and clear career pathways.

**Key Performance Indicators**
1, 2, 5, 6, 8, 10, 11, 18

**Principles**
1, 3, 5, 9, 10, 11

**Actions**

To improve career pathways for Aboriginal people into health professions the NSW Health system will:

3.1 Provide education and training to the potential and current health workforce that reflects current, accepted approaches to health service delivery for Aboriginal people.

3.2 Develop partnerships and networks with schools and universities to promote careers in health for Aboriginal students including traineeships, cadetships and apprenticeships.

3.3 Develop a secondary schools health career development program that identifies and supports school students wishing to develop a career in health.

3.4 Foster career structures and pathways to a range of disciplines/professions that provide access for Aboriginal people.

3.5 Utilise flexible education and training methods and resources to overcome access issues.

3.6 Identify funding and resources (local, state and national) to support effective training and education opportunities for Aboriginal staff.

3.7 Develop a network of NSW Ministry of Health funded training programs that aims to strengthen overall program delivery and support the development of career pathways for new and existing Aboriginal staff.
Leadership and Planning

Key Priority 4: Provide leadership and planning in Aboriginal workforce development

Outcome
Provide strong leadership and innovation to ensure the continuing growth and development of the NSW Health Aboriginal workforce

Map the NSW Health Aboriginal workforce by occupation, salary level, location and classification to ensure workforce distribution matches community need

The NSW Health Aboriginal Workforce Strategic Framework is underpinned by action plans within each Local Health District and other NSW Health organisations

Key Performance Indicators
1, 2, 3, 4, 5, 6, 10, 11, 12, 13, 14, 15, 17

Principles
1, 2, 3, 5, 6, 7, 9, 11, 12

Actions

In providing leadership to ensure continuing growth and development of the Aboriginal workforce the NSW Health system will:

4.1 Build leadership capacity in the Aboriginal health workforce through identifying and actively targeting current and future Aboriginal managers and leaders for development opportunities including leadership development programs

4.2 Ensure clear lines of responsibility for the implementation of Aboriginal health workforce action plans and employment strategies

4.3 Provide ongoing support to the network of Managers of Aboriginal Health Workforce Development across Local Health Districts and ensure these positions are Aboriginal identified

4.4 Develop Aboriginal workforce action plans by each Local Health District and other NSW Health organisations, aligned to this Framework in consultation with key stakeholders and which support Aboriginal people to drive the workforce growth process

4.5 Actively strive for appropriate representation of the Aboriginal workforce in health service planning, development, implementation and evaluation

4.6 Develop partnerships with the Aboriginal community-controlled health sector and other relevant stakeholders to assist in Aboriginal workforce planning and information sharing

4.7 Undertake an Aboriginal Health Impact Statement for all service plans

4.8 Provide sufficient resources to support agreed initiatives outlined in local Aboriginal workforce strategic plans

4.9 Implement joint workforce planning and reporting mechanisms across Local Health Districts and other NSW Health organisations to identify priority workforce roles, set employment targets and monitor progress
University Health Graduates

Key Priority 5: Tap into the increasing pool of Aboriginal university graduates undertaking health courses

**Outcome**
Provide employment to Aboriginal university graduates in health professions

**Key Performance Indicators**
5, 6, 10

**Principles**
1, 2, 5, 9, 11

**Actions**
To maximise the number of Aboriginal university health graduates working in the public sector the NSW Health system will:

5.1 Provide education and training to the potential and current health workforce that reflects current, accepted approaches to health service delivery for Aboriginal people

5.2 Strengthen existing links between universities and Local Health Districts to actively promote employment opportunities directly to Aboriginal students in health programs

5.3 Target vacancies in frontline health professions for Aboriginal graduates of NSW universities

5.4 Develop and invest in individual career pathways for all Aboriginal employees

5.5 Develop promotional materials and information resources targeting Aboriginal university students for careers in health

5.6 Promote NSW Health as health employer of choice to Aboriginal university students by coordinating the distribution of information resources and utilising the available technology

5.7 Deliver the Building Capacity for the Aboriginal Medical Workforce initiative which assists Aboriginal medical graduates to transition through their internship and gain registration as a medical doctor

Culturally Safe and Competent Health Services

Key Priority 6: Build a NSW health workforce which closes the gap in health outcomes between Aboriginal and non-Aboriginal people by providing culturally safe and competent health services

**Outcome**
Maximise the number of NSW Health staff who have completed Aboriginal Cultural Training

**Key Performance Indicators**
1, 2, 9, 16

**Principles**
1, 2, 3, 5, 9, 10, 11, 12

**Actions**
To provide culturally safe and competent health services and work environments the NSW Health system will:

6.1 Acknowledge and accommodate family and community responsibilities of Aboriginal people in employment arrangements, workforce planning, retention and workforce development

6.2 Ensure all staff across NSW Health have completed Aboriginal cultural training

6.3 Develop structures and resources at all levels across the public health sector to support implementation of the Aboriginal Health Workforce Strategic Framework 2011-2015

6.4 Monitor and evaluate the effectiveness and impact of Framework strategies
A NSW Health Aboriginal Workforce Strategic Steering Committee will be established to oversee the implementation of the Framework and will be made up of representatives of the NSW Ministry of Health, Local Health Districts and other NSW Health organisations. The Steering Committee will exist for the duration of the Framework from 2011 to 2015.

The Steering Committee will oversee monitoring of the Framework and will provide collated reports half-yearly to the Director General, NSW Ministry of Health.

Local Health Districts and other NSW Health organisations will be required to provide half yearly reports against the key performance indicators which will be presented to the NSW Aboriginal Workforce Strategic Steering Committee.

The NSW Ministry of Health will work with Local Health Districts and other NSW Health organisations to develop Aboriginal health workforce action plans to implement the Framework.

Evaluation

The NSW Ministry of Health will undertake a review of this Framework in 2013 and following its completion in 2015.

Local Health Districts and other NSW Health organisations are requested to evaluate their local Aboriginal Health Workforce Action Plans throughout the duration, to ensure they are being satisfactorily implemented and achieving key outcomes/targets. This is fundamental to the ongoing success of the Framework and is to be based on the core components from An Evaluation Framework for Aboriginal Health Programs: The NSW Health Experience.

Evaluation can be assessed in three key areas:

1. Assessment of the Key Priorities
   Was the priority setting process that led to the development of the Key Priorities appropriate and comprehensive?

2. Evaluation of strategic program development and implementation
   Were the Key Priorities adequately planned and implemented?

3. Effectiveness
   Have the Key Performance Indicators achieved their outcomes with regard to health workforce, service provision, health improvement and community empowerment?

Contact

For inquiries regarding the NSW Health Aboriginal Workforce Strategic Framework contact: Aboriginal Workforce Unit, Workforce Planning & Development Branch, NSW Ministry of Health.

Freecall: 1800 855 494
Growth
Growing the Aboriginal health workforce

Leadership and Planning
Provide leadership and planning to Aboriginal workforce development

 Partnerships
Develop partnerships between health and education sectors

Collaboration
Increase collaboration across ALL health professions

Graduates
Aboriginal university graduates

Safe & Competent
Culturally safe and competent organisation
Designed by Aboriginal Elder Harold Thomas in 1971. Yellow represents the sun (giver of life) and yellow ochre. Red represents the red earth (the relationship to the land) and the red ochre used in ceremonies. Black represents the Aboriginal people.

Stepping Up by artist Jessica Birk. Aboriginal people from all parts of NSW on a journey towards the top of the hill. With one foot firmly on the earth, the other just hovering above in an effort to achieve more, with the sky being the only limit to people’s opportunities.

An initiative of NSW Ministry of Health to halve the gap in employment outcomes between Aboriginal and non-Aboriginal people within a decade.

Designed by Aboriginal Elder Harold Thomas in 1971. Yellow represents the sun (giver of life) and yellow ochre. Red represents the red earth (the relationship to the land) and the red ochre used in ceremonies. Black represents the Aboriginal people.