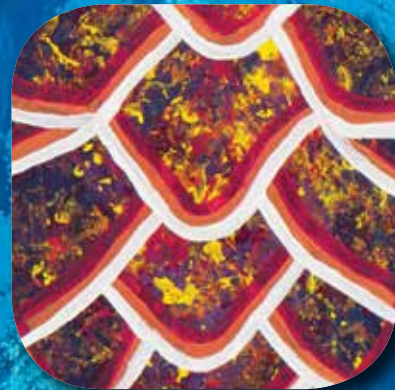




Government of Western Australia
Department of Health
Aboriginal Health

Aboriginal Health Impact Statement and Declaration for Department of Health and Health Service Providers



Working together, Department of Health and Health Service Providers are committed to ensuring Aboriginal health is everyone's business.

Aboriginal people make up only 3.6 per cent of the Western Australian population, and yet have the greatest health needs of any group in the State.

To improve the health and wellbeing of all Aboriginal people in WA, employees and teams are required to apply the principles of an Aboriginal Health Impact Statement and Declaration (ISD) for the Department of Health and Health Service Providers before preparing new or revised health policies, strategies, programs, practices or procedures. An ISD demonstrates that the health impacts on Aboriginal people have been considered and appropriately incorporated into relevant health initiatives.

Acknowledgement

The Department of Health and Health Service Providers extend their appreciation to the New South Wales Centre for Aboriginal Health for its permission to apply principles of the NSW Aboriginal Health Impact Statement for use in Western Australia. The work undertaken by the NSW Centre for Aboriginal Health in the development and implementation of the impact statement is acknowledged and informs the initiative of Department of Health and Health Service Providers.

Acknowledgement of Country and People

The Department of Health and Health Service Providers acknowledge the Aboriginal people of the many traditional lands and language groups of Western Australia. They acknowledge the wisdom of Aboriginal Elders both past and present and pays respect to Aboriginal communities of today.

Using the term – Aboriginal

Aboriginal and Torres Strait Islander may be referred to in the national context and Indigenous may be referred to in the international context. Within Western Australia, 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. No disrespect is intended to our Torres Strait Islander colleagues and community.



Introduction

The Department of Health and Health Service Providers work strategically to ensure they provide the best possible health care to meet the health needs of Aboriginal people, families and communities in Western Australia.

The ISD is a practical way to plan ahead and think about the impact of new and revised health policies, strategies, programs, practices and procedures on Aboriginal people, families and communities from initial development through to implementation and evaluation.

The ISD is aligned to the *WA Aboriginal Health and Wellbeing Framework 2015–2030* (the Framework), and is one of the strategies to achieving the Framework's Strategic Direction 3 – *A culturally respectful and non-discriminatory health system*.

The ISD aims to ensure the needs, interests and circumstances of Aboriginal people and employees are incorporated into the development of new and revised health policies, strategies, programs, practices and procedures by allowing Aboriginal people to provide cultural input. There is evidence to support that health initiatives will have differing impacts on different population groups and that cultural differences do contribute to the health status, needs and outcomes. Aboriginal concepts of health and illness differ from those in the general population and this can impact on their health status and health service needs. Health is more than the physical wellbeing of the individual, but also encompasses the social, emotional and cultural wellbeing of the whole community.


It is anticipated that an ISD will increase access and equity to health services and improve Aboriginal health outcomes by acknowledging and respecting the diverse health needs of Aboriginal people.

As a way of ensuring Aboriginal cultural security, the ISD is designed to be easily applied by any health service or unit. To support this approach, all employees and contractors are required to undertake professional development in Aboriginal cultural learning to reinforce the importance of cultural understanding.

By committing to the ISD, the health service or unit declares:

- consultation and negotiation processes have been undertaken with Aboriginal people and/or organisations
- the needs, interests and circumstances of Aboriginal people have been properly considered
- the impact(s) on Aboriginal people have been identified and, where necessary, mitigation strategies developed.

The ISD incorporates the principles of substantive equality, a whole-of-life view of health, recognition of the importance of self-determination in Aboriginal communities, working in partnership, cultural security and acknowledgement of the impact of trauma and loss on Aboriginal communities and families.



The information provided in the ISD will enable Aboriginal Health Policy Directorate to monitor the progress of this approach which aims to improve the health and wellbeing of Aboriginal people and their communities in Western Australia.

For further information about using an ISD, please contact:

Aboriginal Health Policy Directorate
Department of Health
Ground Floor, C Block
189 Royal Street
EAST PERTH WA 6004
Tel: (08) 9222 4089
Email: AboriginalCulturalLearning.DOH@health.wa.gov.au



Aboriginal Health Impact Statement and Declaration Guidelines

The Aboriginal Health Impact Statement and Declaration (ISD) for Department of Health and Health Service Providers aims to ensure that the needs, interests and circumstances of Aboriginal clients and employees are incorporated into the development of new and revised health services' policies, strategies, program practices and procedures.

An ISD is a requirement of [OD 0476/13 WA Health System Wide Policy Documents \(Operational Directives and Information Circulars\) Policy \(external site\)](#), when developing new or revised statewide policies, programs, strategies and practices for Department of Health and Health Service Providers. This includes all service guidelines, procedures and protocols.

A completed ISD will demonstrate that Aboriginal people have been consulted and that the health impacts on Aboriginal people have been considered and appropriately incorporated into relevant health initiatives

Consultation takes time

Aboriginal people access health services at a disproportionately higher rate than non-Aboriginal people. Therefore, Aboriginal stakeholder representation is desirable throughout the development process, from the conceptual stages through to implementation and evaluation.

Consultation takes time, so it is important to undertake this process as early as possible to allow for representatives to engage and respond effectively; reinforcing best practice. Key Aboriginal stakeholders' consultation needs to be facilitated in a culturally secure way to ensure the engagement is effective. At the start of the consultation, all representatives should be informed about their roles and responsibilities and how their contributions will be utilised.

Consulting with Aboriginal people and organisations will inform and increase Aboriginal cultural understanding in the provision of health services. Aboriginal stakeholders can provide advice on local health issues as well as general advice about how to incorporate Aboriginal health needs into relevant initiatives. This will improve the outcomes of health policies, strategies, programs, practice and/or procedure for Aboriginal people and communities.

Aboriginal stakeholder consultation	Action/s
<p>A crucial step in any development process is Aboriginal stakeholder consultation which needs to be conducted in a meaningful way with realistic and measurable outcomes.</p> <p>Within the context of health policy development, appropriate representation can broadly be divided into two types:</p> <ul style="list-style-type: none"> ■ government representation ■ community representation. <p>Examples of Aboriginal stakeholders include:</p> <ul style="list-style-type: none"> ■ Department of Health and Health Service Providers Aboriginal employees ■ Aboriginal service providers ■ Aboriginal community members ■ Aboriginal representative bodies. 	<p>Contact the senior Aboriginal health representative in your Health Service Provider to discuss the most appropriate Aboriginal stakeholders to consult.</p> <ul style="list-style-type: none"> ■ North Metropolitan Health Service Director, Aboriginal Health Phone: 9380 7700 ■ South Metropolitan Health Service Manager, Aboriginal Health Phone: 6152 1178 ■ East Metropolitan Health Service Phone: 9224 3817 or 9224 2415 ■ Child and Adolescent Health Service Director, Aboriginal Health Phone: 9340 7067 ■ WA Country Health Service Area Director, Aboriginal Health Phone: 6145 4113 <p>Alternatively, please contact: Aboriginal Health Policy Directorate Phone: 9222 4089</p>

Positive engagement with Aboriginal stakeholders

To ensure effective engagement, the advice of Aboriginal stakeholders for any proposed initiative requires a process of positive engagement. For Aboriginal people, effective consultation and negotiation should be based on principles of openness, transparency, integrity, partnership, trust and mutual respect. Staff involved in consultation and negotiation with Aboriginal people should consider participating in Aboriginal cultural learning programs to assist in better understanding Aboriginal history and culture.

Negotiation involves a process where stakeholders participate in good faith to develop an agreement that is acceptable to all parties involved. Effective consultation and negotiation processes are essential to policy development.

Effective consultation may not always lead to agreement and the outcomes of negotiation should not be pre-determined; rather it should lead to a better understanding of stakeholder positions.

To ensure positive and effective engagement you need to allow sufficient time, resources and communication to increase the likelihood of a successful engagement process. Risk



management will ensure participants are not left disappointed, frustrated, cynical and wary of future involvement. This is particularly true for consultation and negotiation involving Aboriginal people. The design of these processes should be determined by the objectives of the consultation or negotiation. The aim of consultation and negotiation processes should be clear.

Consideration may also need to be given to capacity building, funding and skill development to support the participation of some Aboriginal representatives.

Some practical suggestions for conducting effective consultation/negotiation processes with Aboriginal stakeholders are as follows:

- Identify who should be involved in consultation/negotiation at an early stage to ensure appropriate stakeholder involvement throughout the entire process.
- Allocate sufficient time and resources for planning.
- Consider whether different approaches are required for each of the stages of the development and implementation of the health initiative.
- Make explicit the terms of reference for consultation and negotiation such as roles and responsibilities of participants, the purpose of the process, the specific timeframes involved, any constraints affecting the process, identification of issues that are negotiable and/or non-negotiable (and explanations why).
- Where health initiatives are likely to significantly impact Aboriginal people, develop agreed protocols in partnership with stakeholders.
- For consultation processes based on circulation of written materials and requests for comment, it is preferable to allow a minimum of four weeks between distribution of papers and closing date for comments.
- Where appropriate, make use of existing schedules for established groups for consultation and/or negotiation opportunities. This information can be attained by contacting the Aboriginal health area of your respective Health Service Provider.
- Consider using a variety of communication channels when providing information to Aboriginal stakeholders (e.g. face-to-face communication in addition to written materials, use of stories and/or audio-visual materials).
- Be mindful of consultation burnout among Aboriginal stakeholders. Where applicable, consider consolidating consultations about several health initiatives into a coordinated meeting to reduce potential time restraints.

Please ensure participants receive feedback about the information they provide, how their feedback has been incorporated, including any impact on decision-making.

Identify and address Aboriginal health needs

In addition to consultation, relevant statistics and epidemiological data on Aboriginal health, morbidity and mortality should be reviewed. Useful resources include but not limited to, are:

- Australian Bureau of Statistics
- Australian Institute of Health and Welfare
- National Centre for Aboriginal and Torres Strait Islander Statistics
- Australian Indigenous Health InfoNet (www.healthinfonet.ecu.edu.au).

Important information about contextual and environmental factors that may contribute to better understanding of Aboriginal health issues can be obtained through consultations with various stakeholders, such as:

- Commonwealth Department of Health
- national, state and territory peak Aboriginal health organisations
- Aboriginal Community Controlled Health Organisations (ACCHOs) and other Aboriginal health services
- other mainstream community-based services
- local government.

Implementation

It is during the implementation phase that some of the most critical decisions for communities are made. A general misalignment between health service provision and Aboriginal community needs contributes to poor health outcomes. Evidence shows that Aboriginal people access services more frequently, and for more serious health issues. Social determinants affecting the Aboriginal community that have led to poor health outcomes include education levels, employment and socioeconomic status. Staff should strive to ensure the implementation of new or revised policies, strategies, programs, practices and procedures are adequately resourced.

Funding allocations should give due weight to the higher health and service costs for Aboriginal people. Funding decisions should consider the existing resource levels of individual services to ensure that smaller services with lower capacity have opportunities for growth.

Successful consultation and negotiation with Aboriginal stakeholders are critical to guiding implementation. Some issues that should be considered when developing recommendations for the implementation phase include the:

- allocation of sufficient time for planning, consultation/negotiation and execution of implementation processes
- identification of critical implementation issues for communities such as infrastructure and workforce issues, and potential barriers to implementation
- adaptation of programs, campaigns and materials that are culturally respectful
- potential need for clinical and interpersonal skills development, mentoring and support between Aboriginal and non-Aboriginal staff.



Review and evaluation

The evaluation of a health policy, strategy, program, practice or procedure affecting Aboriginal people should be included as part of the consultation process. Considerations in the development of an evaluation plan may include the following:

- An examination of how well the health policy, strategy or program has addressed Aboriginal health and/or health service needs (both access and impact) the long term sustainability of health programs, where appropriate.
- Provision for feedback of performance data to relevant groups to better meet community needs.
- Development of agreed performance indicators that include:
 - quantitative measures of equity and access to resources and programs
 - qualitative indicators on issues such as cultural security, capacity-building, program continuity and responsiveness to community needs.
- Reporting requirements that are consistent, as far as possible, with existing reporting and evaluation requirements at a program level relative to the scale of resources being applied.

It is understood that some new or revised health policies, strategies, programs, practices or procedures may not have any impact on Aboriginal people therefore, completion of the declaration stating this fact will be sufficient.

In summary, these guidelines provide staff information on how to undertake consultation with Aboriginal people with the explicit purpose of improving the health and wellbeing of all Aboriginal people in WA. The ISD is an important reminder that encouraging participation by Aboriginal people in health matters will provide the best opportunities to achieve Aboriginal Health Policy Directorate's vision: *Aboriginal people living long, well and healthy lives.*

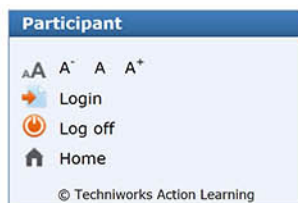
How to access and complete an ISD

- ISDs are only available online. The online process allows for the accurate recording of all ISD's across Department of Health and Health Service Providers.
- A 20 minute online training component needs to be undertaken before completing your first ISD. The training is a one-off and is not assessed or graded.
- Once your training is complete, you can access the online ISD form.
- Only one person can author the ISD; however several people can be assigned as read/write participants.
- Once completed and submitted the ISD is automatically sent to the assigned line manager for approval.
- Once approved the ISD remains online with a receipt number automatically assigned. A receipt number assists Department of Health and Health Service Providers to identify and track the ISD.
- The ISD is to be saved as a PDF on your local drive.

Access to the ISD is via to the Department of Health's Learning Management System:
<https://www.techniworks.com.au/WA Health>

Please note that if you have previously used the Department of Health's Learning Management System to access mandatory training (Aboriginal Cultural Learning, Accountable and Ethical Decision Making and/or Record Keeping Awareness) you will need to click on the blue participant login tab and use your current password.

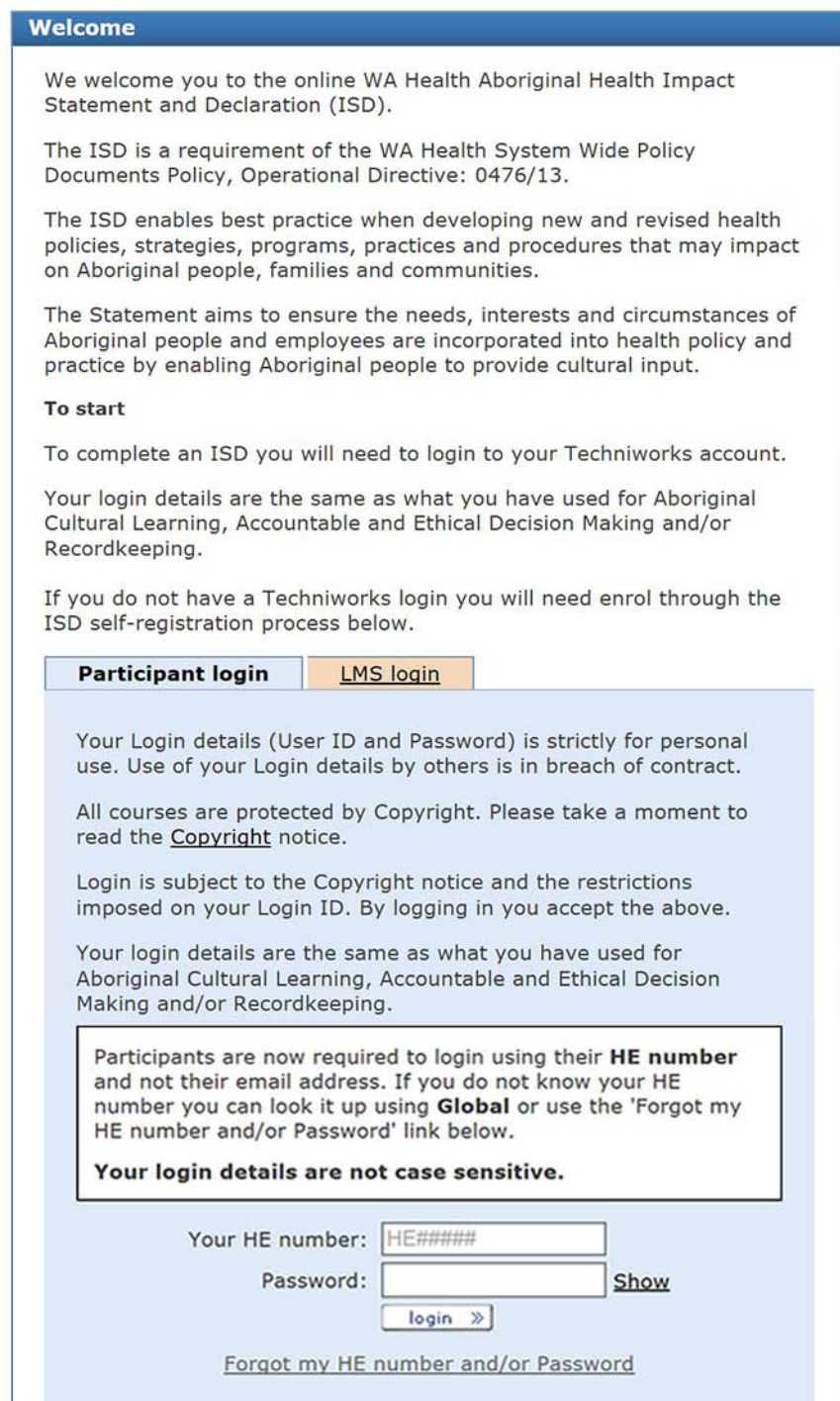
If you cannot remember your password use the 'I don't know my password' function and a new password will be emailed to you.



Participant

- ⏏ A⁻ A A⁺
- ➔ Login
- 🔌 Log off
- 🏠 Home

© Techniworks Action Learning



Welcome

We welcome you to the online WA Health Aboriginal Health Impact Statement and Declaration (ISD).

The ISD is a requirement of the WA Health System Wide Policy Documents Policy, Operational Directive: 0476/13.

The ISD enables best practice when developing new and revised health policies, strategies, programs, practices and procedures that may impact on Aboriginal people, families and communities.

The Statement aims to ensure the needs, interests and circumstances of Aboriginal people and employees are incorporated into health policy and practice by enabling Aboriginal people to provide cultural input.

To start

To complete an ISD you will need to login to your Techniworks account.

Your login details are the same as what you have used for Aboriginal Cultural Learning, Accountable and Ethical Decision Making and/or Recordkeeping.

If you do not have a Techniworks login you will need enrol through the ISD self-registration process below.

Participant login **LMS login**

Your Login details (User ID and Password) is strictly for personal use. Use of your Login details by others is in breach of contract.

All courses are protected by Copyright. Please take a moment to read the [Copyright](#) notice.

Login is subject to the Copyright notice and the restrictions imposed on your Login ID. By logging in you accept the above.

Your login details are the same as what you have used for Aboriginal Cultural Learning, Accountable and Ethical Decision Making and/or Recordkeeping.

Participants are now required to login using their HE number and not their email address. If you do not know your HE number you can look it up using **Global or use the 'Forgot my HE number and/or Password' link below.**

Your login details are not case sensitive.

Your HE number:

Password: [Show](#)

[Forgot my HE number and/or Password](#)



Role and responsibilities

Step 1. Creating an ISD		
Responsible person/area	Role and responsibilities	Automated Action via Techniworks LMS
ISD author	<ul style="list-style-type: none">■ Complete the 30min online ISD training module via the Techniworks Learning Management System (LMS) (once off requirement).■ Complete the online ISD form, via the Techniworks LMS.■ The author may seek advice from HSP Aboriginal Health Team regarding 'consultation'.■ Once the form is completed 'submit' the ISD for approval.	Once 'submitted' an automatically generated email with a link to the ISD will be sent to the nominated Manager for review.
HSP	Provide advice to the authoring officer if requested.	n/a

Step 2. Review and Approval

Responsible person/area	Role and responsibilities	Automated Action via Techniworks LMS
Manager	<ul style="list-style-type: none"> ■ The Manager will receive an email with a link to view the ISD. ■ They will need to review the ISD and either: <ul style="list-style-type: none"> • approve the ISD • request further information from the author, or • cancel the ISD as it is not required. 	<p>If further information is required an automatically generated email will be sent back to the author with the manager's comments (return to step1).</p> <p>If approved</p>
HSP	Provide advice to the Manager if requested.	n/a



Step 3. Final Endorsement		
Responsible person/area	Role and responsibilities	Automated Action via Techniworks LMS
HSP	<ul style="list-style-type: none"> ■ HSP to monitor the Aboriginal Cultural Learning mailbox and review any ISDs that have been 'approved'. ■ Review 'approved' ISDs, assess the adequacy, and either: <ul style="list-style-type: none"> • endorse the ISD, or • request further information and provide advice. 	<p>If further information required:</p> <ul style="list-style-type: none"> ■ the HSP representative will need to contact the author and/or the approving manager to discuss ■ all edits to the ISD need to be made by the author from within their Techniworks LMS account ■ the ISD can be re-submitted once edited (return to step 1). <p>If endorsed no automated action on the system or ISD form is required (go to step 4).</p>
AHPD (statewide policies only)	<ul style="list-style-type: none"> ■ Monitor the DOH Aboriginal Cultural Learning mailbox and review any statewide ISDs that have been 'approved'. ■ Review 'approved' ISDs, assess the adequacy, and either: <ul style="list-style-type: none"> • endorse the ISD, or • request further information and provide advice. 	<p>If further information required:</p> <ul style="list-style-type: none"> ■ AHPD will need to contact the author and/or the approving manager to discuss ■ if required, all edits to the ISD need to be made by the author from within their Techniworks LMS account ■ the ISD can be re-submitted once edited (return to step 1). <p>If endorsed no automated action on the system or ISD form is required (go to step 4).</p>

Step 4. Recording and reporting

Responsible person/area	Role and responsibilities	Automated Action via Techniworks LMS
HSP	If the HSP is satisfied with the adequacy of an ISD they should record and file completed ISDs as per Department of Health and Health Service Providers recordkeeping standards.	n/a
AHPD	AHPD will provide the total number and status of all created ISDs for each of the HSPs within the Quarterly Reports.	n/a

Enquiries

If you need further guidance on the content of your Aboriginal Health Impact Statement and Declaration please contact your local Aboriginal Health team.

North Metropolitan Health Service

E: NMHS.LearningDevelopment@health.wa.gov.au

South Metropolitan Health Service

E: AboriginalCulturalLearning.SMHS@health.wa.gov.au

East Metropolitan Health Service

E: AboriginalCulturalLearning.EMHS@health.wa.gov.au

Child and Adolescent Health Service

E: AboriginalCulturalLearning.CAHS@health.wa.gov.au


WA Country Health Service

E: AboriginalCulturalLearning.WACHS@health.wa.gov.au

Department of Health

E: AboriginalCulturalLearning.DOH@health.wa.gov.au





This document can be made available
in alternative formats on request for
a person with disability.

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