

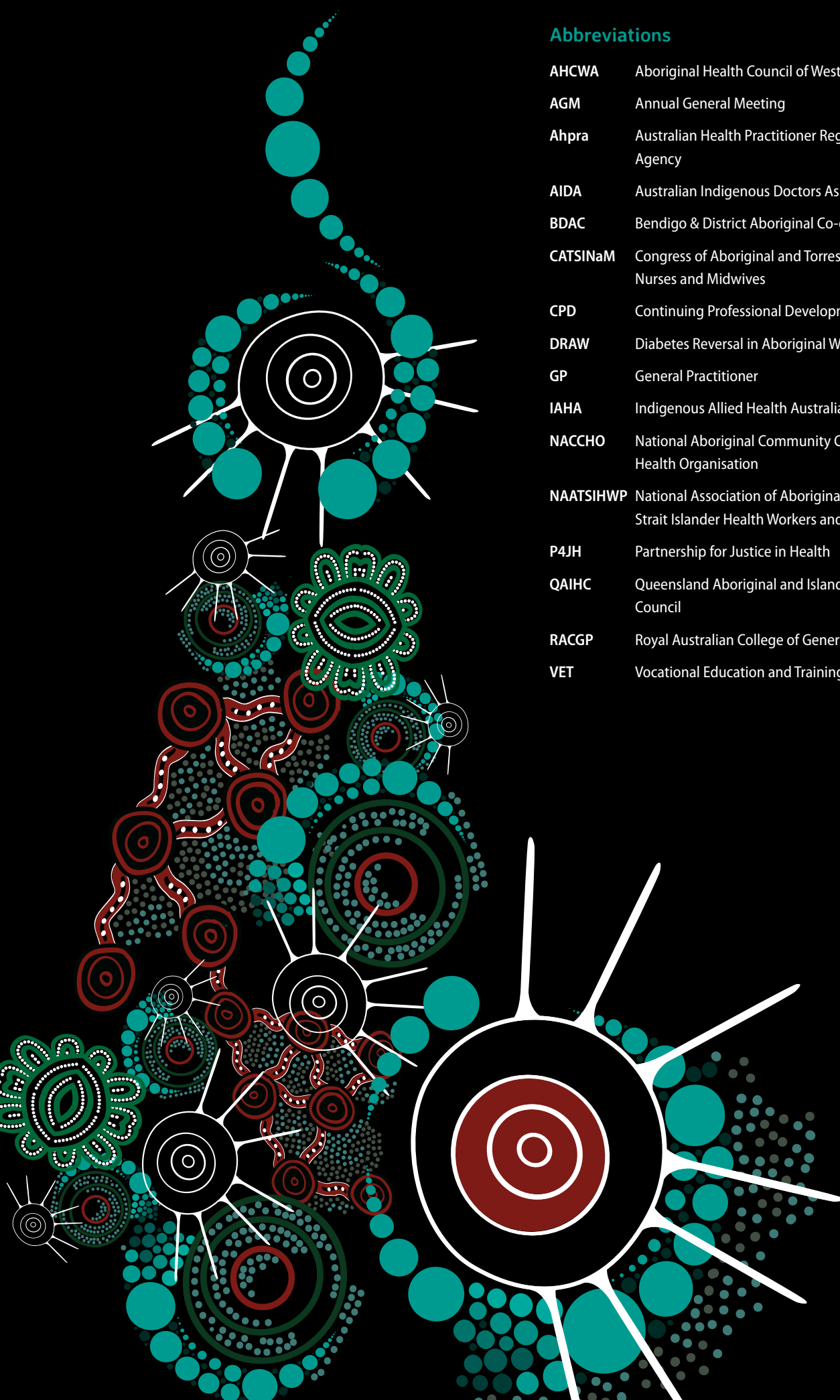


**NAATSIHWP**

National Association of Aboriginal and Torres  
Strait Islander Health Workers and Practitioners

**NATIONAL ASSOCIATION  
OF ABORIGINAL  
AND TORRES STRAIT  
ISLANDER HEALTH  
WORKERS AND  
PRACTITIONERS  
ANNUAL REPORT 2023**





## Abbreviations

AHCWA	Aboriginal Health Council of Western Australia
AGM	Annual General Meeting
Ahpwa	Australian Health Practitioner Regulation Agency
AIDA	Australian Indigenous Doctors Association
BDAC	Bendigo & District Aboriginal Co-operative
CATSINaM	Congress of Aboriginal and Torres Strait Islander Nurses and Midwives
CPD	Continuing Professional Development
DRAW	Diabetes Reversal in Aboriginal Women
GP	General Practitioner
IAHA	Indigenous Allied Health Australia
NACCHO	National Aboriginal Community Controlled Health Organisation
NAATSIHWP	National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners
P4JH	Partnership for Justice in Health
QAIHC	Queensland Aboriginal and Islander Health Council
RACGP	Royal Australian College of General Practitioners
VET	Vocational Education and Training



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**Disclaimer:** Aboriginal and Torres Strait Islander persons are advised that this report may contain images of deceased persons.

# Welcome

The National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners (NAATSIHWP) acknowledges Traditional Custodians across Australia. We value your knowledges, wisdom, communities, cultures, and ongoing connections to the lands, waterways and seas. In particular, we pay tribute to the Ngunnawal and Ngambri peoples on whose lands the NAATSIHWP office is situated. It is a privilege conducting our business on the lands you have occupied and cared for over thousands of years.

To those past and present Elders whose Countries we have visited this year. Thank you for your generosity and protection, and for welcoming us onto your lands.

To our past, present and future leaders, we are committed to a more truthful, just and equitable future – we hope you see us demonstrating this in the work we are undertaking. We will continue to be guided by you and support your aspirations to promote more positive pathways for future generations.

## Our Artwork

The original NAATSIHWP artwork was designed by Ngarrindjeri artist, Jordan Lovegrove from South Australia. It represents working together for healing. The orange meeting places and paths in between represent the community, and the little dots represent healing. The white meeting places represent the different health organisations and workers reaching out to the community.







A strong, credible and viable national association that is widely recognised for its cultural and professional integrity, and commitment to supporting and gaining recognition for both current and future generations of Aboriginal and Torres Strait Islander Health Workers and Health Practitioners.



# What we do

The National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners (NAATSIHWP) is the peak workforce organisation with responsibility for ensuring the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce is embedded safely as a vital, valued and professional component of Australia's health care system.

We have been funded by the Australian Government since August 2009 to:

- > play a key role in the delivery of Aboriginal and Torres Strait Islander health, education and employment outcomes
- > support a large and growing national network of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners and
- > influence and strengthen the delivery of policies, programs and services that impact beyond health into social policy, education, culture and reconciliation.

We work in partnership with other Aboriginal and Torres Strait Islander Community Controlled Organisations, governments and a broad range of stakeholders to:

- > address the under representation of Aboriginal and Torres Strait Islander people employed within Australia's health care system
- > expand and strengthen the professional capability of the Aboriginal and Torres Strait Islander Health Worker and Health Practitioner Workforce across all health services (Aboriginal community control, government and private practice)
- > promote the delivery of culturally safe and effective evidence-based models of care and
- > impact the self-determined development of Aboriginal and Torres Strait Islander peoples and the transformation of policy and practice at the national level.

## Our Values

Our values are consistent with those passed down from our Ancestors:

- > cultural integrity
- > cultural respect
- > the importance of connection to community
- > strong leadership
- > resilience and determination
- > honesty and transparency
- > dedication and passion
- > commitment to quality workforce and service delivery
- > diplomacy and sensitivity.

## The Legacy of our Leaders

NAATSIHWP acknowledges all our past and present leaders in the Aboriginal and Torres Strait Islander health sector who have provided us with the cultural and spiritual foundations and teachings that guided us on our path. They inspire us to become: *A strong, credible and viable national association that is widely recognised for its cultural and professional integrity, and commitment to supporting and gaining recognition for both current and future generations of Aboriginal and Torres Strait Islander Health Workers and Health Practitioners.*

## Our logo

The NAATSIHWP logo was designed by one of our founding members, Patrick Jagamarra Ah Kit.

It represents Aboriginal and Torres Strait Islander people coming from all parts of the country to form the Association and uses colours that reinforce our cultural identity – who we are. The U shape represents all Aboriginal and Torres Strait Islander peoples of our country. The small boomerangs represent our people's toughness and resilience to handle all situations. The bigger boomerangs are windbreaks and shields that provide safety, stability, education, guidance, and vision towards the future.





## Invest in the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce today!

All Australian citizens have the right to safe and high-quality health care. Together, we can ensure Aboriginal and Torres Strait Islander People experience health and wellbeing through a prism of culture, dignity, and justice.

NAATSIHWP is a charity registered with the Australian Charities and Not for Profits Commission. If you would like to help us grow, strengthen, and safely embed the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce in health services across Australia, please donate now.

**DONATE NOW**



# About the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner Workforce

Aboriginal and/or Torres Strait Islander Health Workers and Aboriginal and/or Torres Strait Islander Health Practitioners are two distinct but related professions that together comprise the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner Workforce.

With no mainstream equivalents, the professions play a unique and critical role in ensuring Australia's health care system meets the needs of Aboriginal and Torres Strait Islander people. Evidence directly connects the workforce to improved health outcomes across the life course. They restore trust, act as health system navigators, deliver culturally safe care, play a role in early intervention and prevention, improve access to health care services and the patient experience.

The workforce was established by Aboriginal and Torres Strait Islander people for Aboriginal and Torres Strait Islander people in response to the need for geographically accessible and culturally safe health care. Unofficial accounts and narratives indicate the workforce started to emerge close to a century ago, and since this time it has continued to grow and progress under the guidance, knowledge, and leadership of Aboriginal and Torres Strait Islander people every step of the way.

Today, with the Aboriginal and Torres Strait Islander Health Practice Board of Australia guiding professional standards and a national qualification framework tailored to the health needs of a growing Aboriginal and Torres Strait Islander population, the workforce provides perhaps one of the most significant demonstrations of how inherent self-determination is to the health and wellbeing of Aboriginal and Torres Strait Islander people.

Aboriginal and/or Torres Strait Islander Health Workers and Aboriginal and/or Torres Strait Islander Health Practitioners receive practical, comprehensive primary health care training through the vocational education and training (VET) system. Importantly, this is designed to provide Aboriginal and Torres Strait Islander people with vital and alternative entrance level pathways for careers in the health sector. Across the health care system there are many examples of Aboriginal and Torres Strait Islanders who have started careers in this workforce and successfully transitioned to nursing, allied health, general practitioners (GPs), researchers, practice managers and health system administrators.





## Who they are

Of the two professions, Health Practitioners are trained to perform high level clinical skills and work autonomously. They are required to meet practice standards and register with the Aboriginal and Torres Strait Islander Health Practice Board of Australia. The registration of Health Practitioners is primarily designed to promote public safety, increase patient trust, promote professional development, and act as an accountability and oversight mechanism. There is no registration requirement for Aboriginal Health Workers.

NAATSIHWP defines:

> an ***Aboriginal and/or Torres Strait Islander Health Worker*** as:

- an Aboriginal and/or Torres Strait Islander person who has gained a Certificate II or higher qualification in Aboriginal and/or Torres Strait Islander Primary Health Care under the National Aboriginal and Torres Strait Islander Health Worker training package, **or**
- an Aboriginal and/or Torres Strait Islander person who is currently or has previously worked in an Aboriginal Health Worker role and is able to satisfy evidentiary requirements required by the NAATSIHWP Board.

> an ***Aboriginal and/or Torres Strait Islander Health Practitioner*** as:

- an Aboriginal and/or Torres Strait Islander person who has gained a Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice and has successfully applied for and been registered with the Aboriginal and Torres Strait Islander Health Practice Board of Australia through the Australian Health Practitioner Regulation Agency (Ahpra).

To address the under-representation of Aboriginal and Torres Strait Islander people working in the health care system and ensure it meets the needs of Aboriginal and Torres Strait Islander people there is a genuine occupational requirement to ensure this workforce comprises only Aboriginal and/or Torres Strait Islander people.

# From the Chair

I am honoured to launch NAATSIHWP's 2022-2023 Annual Report. It has undeniably been a year of hard work and growth for both our workforce and organisation.

As Chair of the Board, I reflect on the past year with pride. Our small organisation continues to yield significant results. Together we have worked tirelessly to embed culturally safe and responsive primary healthcare across the health care system. Our national membership network is constantly growing, our knowledge and expertise is increasingly being sought, and our influence and reach spans all jurisdictions. Again, we have seen growing recognition and support for the workforce over the last year.

Our biennial conference held in Sydney stands out as a shining example of our achievements. It was not only our best but a testament to our commitment to fostering the professional development of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce. The conference provided a great opportunity for networking, collaboration, sharing knowledge, and advocating for positive change that respects the diversity and wisdom of our cultures. It was great to connect with our members, colleagues, and supporters again after some very challenging years.

Over the year we were also supported by the government to drive reform through the National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021 – 2031, demonstrating that our reputation as a national workforce lead is strong. Over the next year, we will be working with key stakeholders to develop consistent and shared understandings about the qualifications, skills and capabilities of the workforce and improve the professional utilisation and take up of the roles.

We are proud to showcase the work of our members in this Annual Report. Their stories highlight the important work underway across the country, from advocating for law reform in Victoria, to implementing novel chronic care programs in the East Kimberley. Thank you to Wayne Beddall, Jaydene Burzacott, Shaun Cox, Hayley Longbottom, and Tahnee Hooper for sharing your stories. We are so grateful, and hope your wisdom and drive inspires others.



As we celebrate our successes, we must also bid a heartfelt farewell to Board Members Christine Ingram and Natalie Pangquee whose dedication and leadership have been instrumental in guiding our organisation over recent years and we warmly welcome Richelle Jackson who will bring fresh perspectives and expertise to our mission. Lastly, I extend my sincere appreciation to all our board members, staff, collaborators, and partners, and, most importantly, to our members for their unwavering support and commitment. It is through our collective efforts that we continue to make a difference in the lives of our Peoples nationwide.

A handwritten signature in black ink, appearing to read 'D Follent'.

**David Follent**  
Chairperson  
NAATSIHWP Board

# From the CEO

I am in awe of the dedication and commitment demonstrated by our members. Together over the past year we have embraced challenges, celebrated victories, and continued to advocate for the health and wellbeing of our communities.

For many of us, the year was an unsettling one. The COVID-19 pandemic, climate disasters, the rising cost of living, housing crisis, and the announcement of the Voice to Parliament referendum have all had a profound impact on our communities. Existing disparities in health and wellbeing were compounded underscoring the essential role Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners play in safeguarding our People's health. In the face of adversity, our workforce continues to stand at the frontline, demonstrating resilience, compassion, and integrity to meet the unique needs of our communities.

Throughout this report, you will find stories of dedication, innovation, and perseverance. Our members have implemented community-led health initiatives, bridged the gap between Western medicine and traditional healing practices and delivered a high standard of culturally safe care. Their efforts not only improve health outcomes but also nurture a deep sense of cultural identity and pride within the communities they serve.

It is for this reason that NAATSIHWP's commitment to supporting and empowering the workforce remains steadfast. Over the year we continued to provide professional development opportunities, advocacy, and networking platforms that foster professional recognition, collaboration, and knowledge-sharing. By nurturing the skills and leadership capacity of Aboriginal and/or Torres Strait Islander Health Workers and Practitioners, we have strengthened our collective mission: to enhance the health and wellbeing of our communities. We firmly believe that culturally safe and responsive healthcare services are key to improving outcomes, and our ongoing work has contributed to policy changes that prioritise the growth and development of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce.

This report is also a testament to the significant progress our organisation has made. It demonstrates that we have continued to engage with policymakers and health authorities to elevate the voices of the workforce and our communities. We advocated for policies to address the root causes of poor health and focussed on the need for a whole of government approach to taking the Aboriginal and/or



Torres Strait Islander Health Worker and Health Practitioner Professions forward. As part of this work, we were successful in securing funding to pursue greater national consistency in scopes of practice and regulation. I am pleased to advise that work to lead a national consultation process is due to commence shortly.

As the only organisation in Australia with responsibility for progressing the professional interests of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners our unique expertise and knowledge is proving to be a marketable commodity. With our consultancy arm gaining traction we commenced the implementation of measures to better protect our cultural and intellectual property. The journey towards health equity and justice is unfortunately a difficult one, and in closing I would like to thank our members, Board, staff, and partners who have been the driving force behind our accomplishments. Your passion, resilience, and determination haven't gone unnoticed.

**Karl Briscoe**

*Chief Executive Officer*

National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners

# Become a member today!

Joining NAATSIHWP's national membership network helps to increase the profile of the Aboriginal and Torres Strait Islander Health Worker and Health Practitioner workforce and to progress the health and wellbeing aspirations of Aboriginal and Torres Strait Islander people.

Together we can improve the understanding of what Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners do and help to ensure this workforce is embedded as a vital, valued and professional component of Australia's health care system. Evidence directly connects their roles to better health outcomes. All Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners – past and present – can become members. We also encourage professional bodies and/or non-Indigenous friends to help by becoming friends of NAATSIHWP.



**Become a member today!**

## Our Membership Categories

### FULL

A person who:

- > identifies as an Aboriginal/or Torres Strait Islander person
- > is qualified as an Aboriginal and/or Torres Strait Islander Health Worker or Health Practitioner
- > has completed a minimum qualification of a Certificate II in Aboriginal and Torres Strait Islander Primary Health Care.

Full members have voting and speaking rights at the NAATSIHWP Annual General Meeting following six months of continuous membership, and access to the NAATSIHWP Members Portal which contains tools for Continuing Professional Development (CPD) records, training, advice, information and resources.

### FULL (without qualifications)

We welcome you to join NAATSIHWP as a Full Member (without qualifications) if you:

- > identify as an Aboriginal/or Torres Strait Islander person
- > are currently or have previously worked in an Aboriginal Health Worker role
- > can satisfy evidentiary requirements required by NAATSIHWP Board.

### ASSOCIATE

Our associate members:

- > identify as an Aboriginal and/or Torres Strait Islander person, and
- > work in the health field but are not Aboriginal and/or Torres Strait Islander Health Workers or Health Practitioners.

### STUDENT

Our student members:

- > identify as an Aboriginal and/or Torres Strait Islander person, and
- > are currently undertaking study in an eligible Aboriginal and Torres Strait Islander Primary Health Care course (proof of enrolment is required).

### CORPORATE FRIEND

A corporate friend member is:

- > organisations who are able to support NAATSIHWP achieve its vision and purpose.

### FRIEND

A friend member is:

- > an individual who is able to support NAATSIHWP in achieving its vision and purpose.

Membership applications are approved by the NAATSIHWP Board.

More information about becoming a member can be found at

[www.naatsihwp.org.au/membership](http://www.naatsihwp.org.au/membership)





# About this Report

This report serves as testament to our achievements over recent years. It highlights our commitment to both taking the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce forward and to building a strong and effective organisation.

It further reinforces that effective Aboriginal and Torres Strait Islander leadership, governance and the valuing of cultures are key to the success and sustainability of all programmes and initiatives.

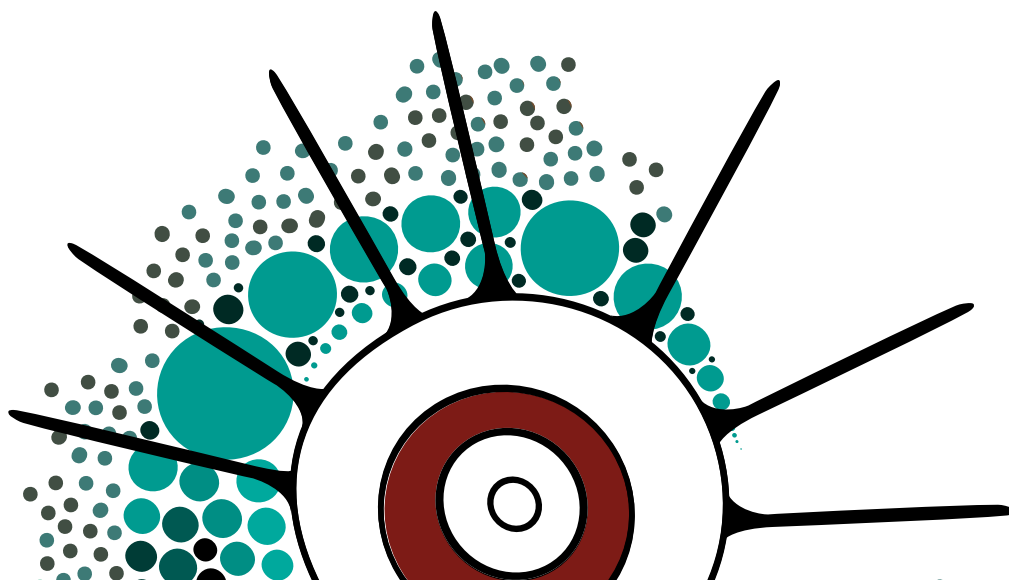
As this is the final Annual Report against the Strategic Plan 2020-2023, it provides a detailed overview of just some of the initiatives we have progressed over the past year as well as a snapshot of our major achievements over the entire three-year course. It shows that over this period we have made significant inroads towards achieving the objectives of the Strategic Plan and importantly strengthened health system understanding of the role, scope, and effective deployment of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners as well as our leadership and influence as an organisation.

The report confirms that long term strategic rights-based approaches underpinned by the principle of self-determination remain fundamental to everything we do. Our workforce was established by Aboriginal and Torres Strait Islander people for Aboriginal and Torres Strait Islander people and has progressed under the guidance and direction of Aboriginal and Torres Strait Islander people every step of the way. Likewise, our organisation is founded on Aboriginal and Torres Strait Islander aspirations, decisions, and the valuing of our cultures. All Board members have direct experience in the workforce, and we proudly uphold accountability to our members and all Aboriginal and Torres Strait Islander people.

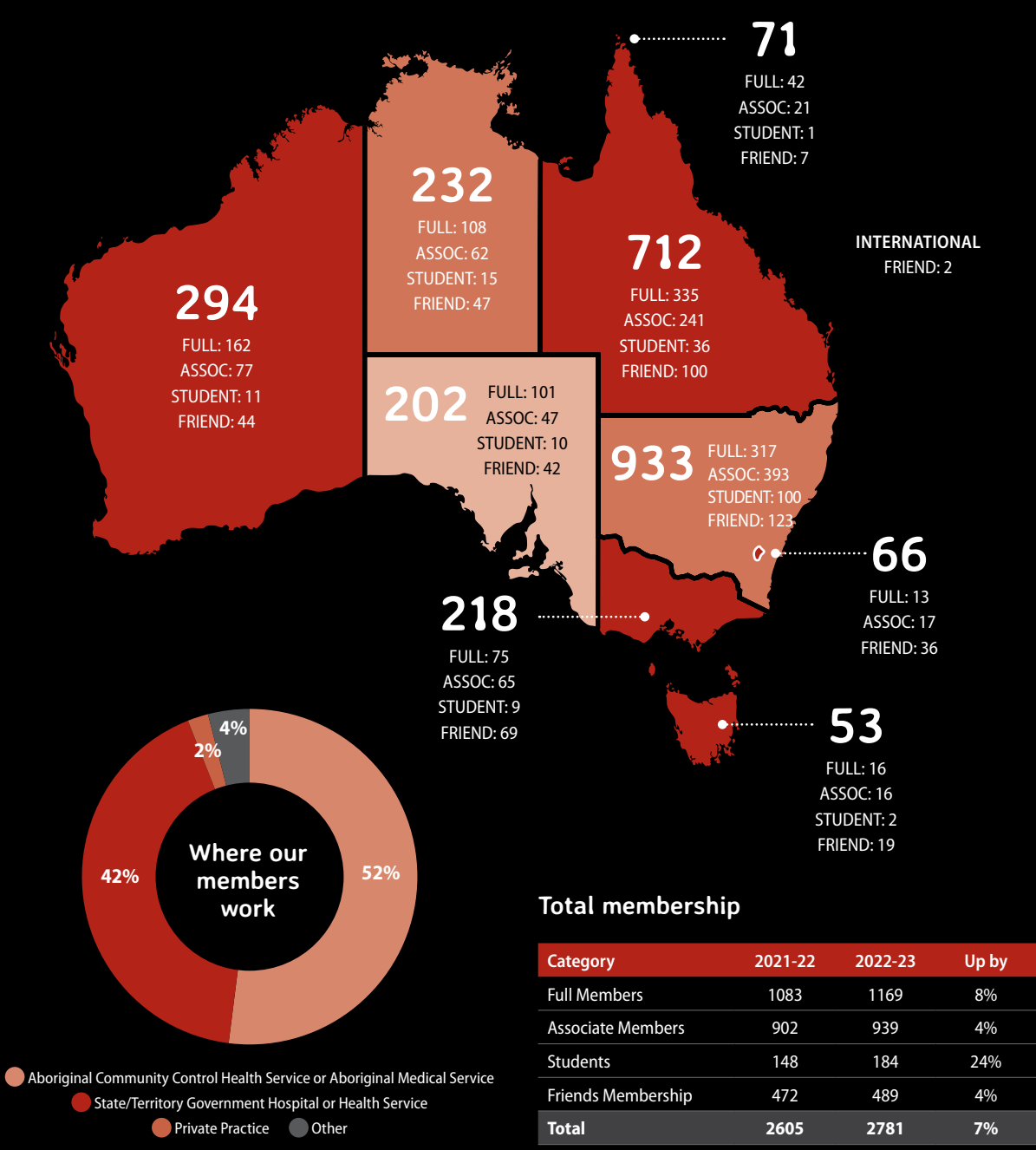
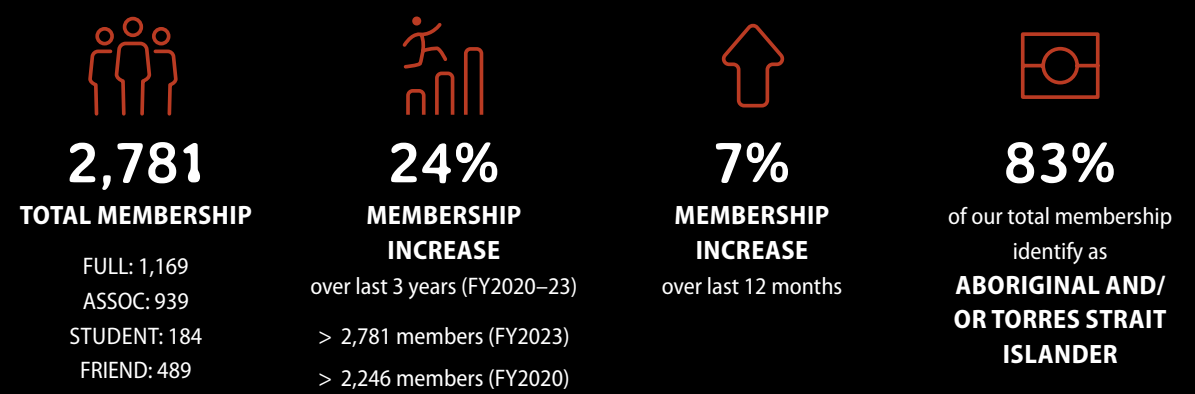
While the report demonstrates that small organisations can deliver a legacy, those in the business of caring for community know that change is difficult to quantify. A conversation with the right person can be as impactful as a major project. Through the story telling in this report, we also seek to highlight the impact of those smaller initiatives which have the potential to lead to big change. The stories highlight the critical role our workforce plays.

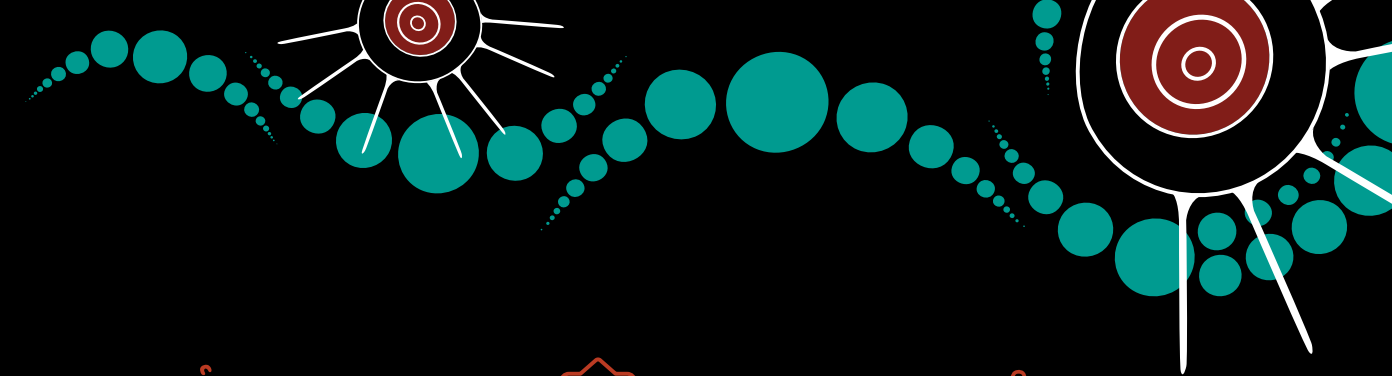
Lastly, the report provides a snapshot of what you can expect from us in the future. Over 2022-23 we developed a new Strategic Plan for the 2024-2027 period. Our new plan builds on our achievements to date and is shaped by the expertise, reflections and knowledge of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners.

Achieving significant results however will demand continuous support and investment and, in this respect, we reiterate the critical importance of upholding commitments outlined in the *National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031*, administered by the Commonwealth Department of Health and Aged Care. Our projects transcend individual financial years, our relationships endure beyond reporting periods, and we have a clear vision for the way forward. We know that community-controlled organisations deliver the best services and outcomes for Aboriginal and Torres Strait Islander people and going forward we need governments to place their trust in us to enact meaningful change.



# At a Glance





**↑ 55%**

#### INCREASE IN REPRESENTATION

- > **635** Engagements (FY2022)
- > **410** Engagements (FY2021)



**5,985**

#### SOCIAL MEDIA FOLLOWERS

- (Facebook, Twitter, LinkedIn, Instagram)
- ↑ up **23%** from FY2022 (4,852)



**586**

#### SOCIAL MEDIA POSTS

- ↑ up **153%** from FY2022 (231)



**9**

#### FACE TO FACE PROFESSIONAL DEVELOPMENT FORUMS

- > Alice Springs
- > Bamaga
- > Thursday Island
- > Mackay
- > Ballina
- > Port Lincoln
- > Kalgoorlie
- > Dubbo
- > Shepperton



**30**

#### TRAINING PROGRAMS ENDORSED AS SUITABLE FOR CPD



**140**

#### PROFESSIONAL SUPPORT & DEVELOPMENT OPPORTUNITIES

- > Job vacancies
- > Scholarships
- > CPD courses
- > Webinars
- > Forums
- > Symposiums
- > Yarning sessions



**50**

#### NEWSLETTERS CIRCULATED



**233**

#### NATIONAL CONFERENCE ATTENDEES



**34**

#### STEERING COMMITTEES/ WORKING GROUPS



**465**

#### ENGAGEMENTS WITH STAKEHOLDERS AND COLLABORATORS



**2**

#### CAREER FORUMS



**52**

#### KEYNOTE SPEECHES, PRESENTATIONS & INTERVIEWS DELIVERED



**3**

#### MENTOR TRAINING

- > Darwin
- > Broome
- > Queensland (virtual)

- Participated in the formal review of 7 training programs and 3 disease specific resources tailored to the specific needs of Aboriginal and/or Torres Strait Islander Health workers and Health Practitioners
- Held a National Day of Recognition
- Achieved internationally recognised ISO9001 quality management standards

## SECTION 1

# Scope of Practice for the Workforce

**Objective:** To increase the appropriate use of the full range of skills and integration of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners into health services across all sectors in the health system.

The effort NAATSIHWP has invested over an extended period to ensure that the qualifications, skills, and roles of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners are better understood and being effectively utilised is being rewarded. As the **only** national peak in Australia with responsibility for safeguarding the professional growth and development of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce we are committed to leading and driving change.

## Progressing Greater National Consistency

We are pleased to advise that work to promote greater national consistency for the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions over recent years has started to reap results. Over the year, we successfully secured funding to lead the delivery of a national consultation process to examine what standardised scopes of practice and harmonised drugs and poisons legislation for the professions should include and involve.

The project responds to actions identified in the National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031 and signifies the beginning of a concerted national effort to ensure that the skills Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners gain as part of their training and qualifications are being used and their roles are being effectively embedded within health care teams.

It seeks to drive reform by uniting all key stakeholders (including Commonwealth State and Territory government agencies and industry partners) behind a nationally consistent approach to the responsibilities, scopes of practice and roles of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners.

The consultation process on greater national consistency for the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions will commence in earnest over the 2023-2024 financial year and result in recommendations for whole of government consideration and action in December 2024.

We are confident that the project will help to address some of the key issues that have impacted on the recruitment, retention, and professional utilisation of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners for well over a decade. Over the coming months we encourage all stakeholders to monitor on our website for further information and details on how they can participate.





## Defining Professional Scopes of Practice

With funding to support the project to progress greater national consistency for the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions secured, the NAATSIHWP team initiated a project to define potential scopes of practice for the workforce as a basis for consultation.

A resource outlining Professional Scopes of Practice for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners has subsequently been developed for release and consideration during the consultation process next year. Given the differences of approach across jurisdictions we know that many Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners are not supported to use the skills they gain as part of their training. The approach NAATSIHWP has taken recognises that the core skills gained through their qualifications provide a benchmark or baseline for what Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners should at the very minimum be entrusted to perform. Once released, the resource will support the effective deployment of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners and ensure that the professions are effectively utilised and leveraged as a crucial part of health care teams, which evidence has shown will improve outcomes for Aboriginal and Torres Strait Islander peoples.

It clarifies the skills and training gained through each level of qualification and differentiates the roles of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners. Role and Capability Assessment Templates for each qualification are included to encourage supervisors to use the full range of skills Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners gain through their training includes.

The resource highlights ways the professions can be effectively deployed as a valuable and essential resource in a range of settings across the health care system, including Aboriginal Community Controlled Health Services, GP clinics, public and private hospitals and health services, aged care facilities, disability services and justice health.

By drawing on the latest release of the *National Aboriginal and/or Torres Strait Islander Health Worker Qualification Framework* (December 2022) the resource highlights that Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners hold valuable cultural, clinical and community development skills and can undertake a wide variety of roles and deliver a broad range of clinical and non-clinical primary health care services.

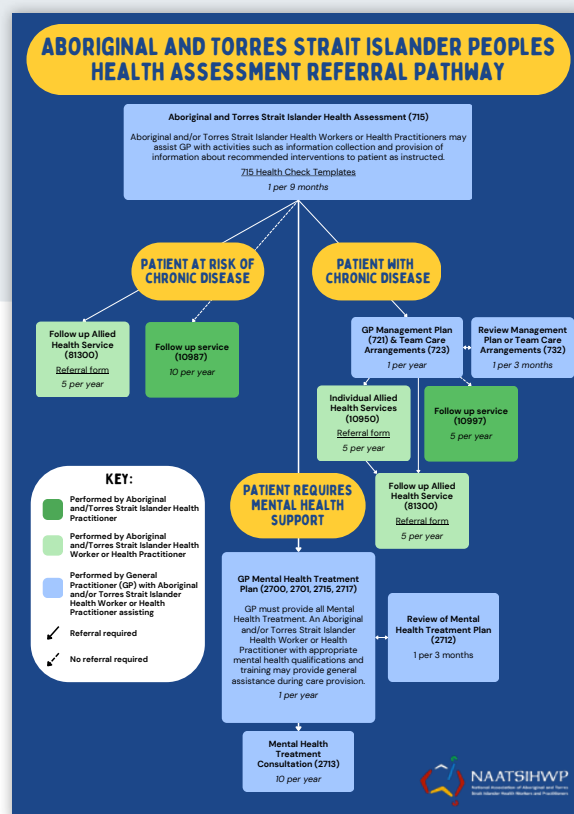
## Guidance for private practices

To close the gap in health and wellbeing outcomes Aboriginal and Torres Strait Islander people must have access to culturally safe and responsive health care irrespective of what service they are accessing or where they are. Embedding the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner Professions in roles across the health care system is key to this end.

However, we know through our national membership network that there is an underutilisation of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners in GP practices and private clinics.

In recognition of this 'gap', NAATSIHWP commenced a project to encourage the take up of roles through the adoption of Aboriginal and/or Torres Strait Islander led models of care. The project involves collaborating with colleagues from the Queensland Aboriginal and Islander Health Council (QAIHC), the Royal Australian College of General Practitioners (RACGP) and other key stakeholders to map MBS items and Health Assessment Referral pathways linked to Annual Aboriginal and Torres Strait Islander health (715) checks.

Aboriginal and/or Torres Strait Islander Health Workers with a Certificate III or higher and all Aboriginal and/or Torres Strait Islander Health Practitioners are eligible to apply for a Medicare Provider Number. Those that qualify can claim Medicare Benefits Schedule (MBS) Items. This means that if GP Practices and Private Clinics implement models of care that utilise the provider claims process effectively, they can invest in Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner roles without adding costs to their budgets. The same cohort of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners are also qualified to either assist in or act as the first point of contact to support the delivery of Annual Aboriginal and Torres Strait Islander health (715) checks.



We are confident that once complete the project will lead to an increase in the take up of roles, improved access to culturally safe care and better health care screening, treatment, and management for Aboriginal and Torres Strait Islander People.

It is anticipated that a guide specifically designed to support GP clinics and private practices to employ and harness the skills of the workforce will be released during the 2023-24 financial year. Thank you to all those stakeholders who have contributed to date.

## Supporting States and Territories

Over the year we worked in close partnership with many States and Territories to update or develop workforce plans, review the status of the professions, and assist with the development of career structures, scopes of practice and models of care.

First and foremost, this work highlighted the skills, commitment, and resilience of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners across the country. It also emphasised the inadequate professional recognition and significant barriers that the workforce faces.

Across other health professions there is a nationwide lack of understanding about the role, skills, and training of the Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners. To increase understanding the NAATSIHWP professional development team started delivering information sessions to supervisors and other staff working with Aboriginal and/or Torres Strait Islander Health Practitioners.

The initiative was well received, and we have had requests for further sessions. Consequently, the delivery of information sessions to supervisors was included in NAATSIHWP's forward work plan and it is anticipated that more of these will be scheduled in the new financial year. If you are interested in attending, please keep your eye on our [website](#) for further details.



## Strengthening understanding of role Community Health Workers play world wide

To contribute to the understanding of the role community health workforces play around the world NAATSIHWP participated in a research project led by Connie Chao, a Thomas J. Watson Fellow from Wellesley College in Massachusetts, USA.

Connie's project, "[Bridging Gaps: An Exploration of Community Health Workers](#)", examines the experiences of community health workers in countries across the world to determine how their roles contribute to the achievement of health justice at the community level. While in Australia, Connie was particularly interested in understanding how national training and regulation impacts the growth and development of the Aboriginal and/or Torres Strait Islander Health Worker and Practitioner workforce.

As part of her field work NAATSIHWP arranged for Connie to shadow Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners working at Galambila Aboriginal Health service in Coffs Harbour. While at Galambila Connie gained an understanding of the unique skills and training of the workforce, the scope of the roles and the importance of Aboriginal and Torres Strait Islander led models of care. We are most grateful to those at Galambila who helped make this field trip a success.

After her placement in NAATSIHWP Connie was travelling to explore community health workforces in the Philippines, China, Brazil, and Liberia. While the results of Connie's research have yet to be released, we are confident it will show that our unique workforce development model, grounded in Aboriginal and Torres Strait Islander cultures, leadership, and governance, provides opportunities for greater Indigenous agency and the growth of professional, skilled, and culturally safe and responsive workforces world-wide.

# Embedding our cultures in health care



**Hayley Longbottom** is a Jerrinja Cullunghutti Wandi Wandandian woman located on the South Coast of New South Wales. She is a Senior Aboriginal Health Worker and the Executive Manager of Health and Wellbeing Services at Waminda South Coast Women's Health and Wellbeing Aboriginal Corporation, and a proud mentor to her colleagues. Hayley also represents the workforce as a NAATSIHWP Professional Ambassador.

"I became involved in health because I was interested in midwifery. I joined Waminda through the Minga Gudja Program, working as an Aboriginal Health Worker to provide maternity services and child and family health care. However, in that position I realised the possibilities of the Aboriginal Health Practitioner role as a professional pathway, and I quickly acquired my Certificate IV.

In my current role I lead the Aboriginal Health Practitioner team. I provide mentorship, support their skill development, the achievement of their qualifications, and work to broaden their scopes so they can provide a range of clinical services. Waminda has an Aboriginal Health Practitioner-led model of care.

At Waminda, we focus on holistic wellness, not illness. Aboriginal Health Practitioners walk in two worlds, operating in a way that works for Mob. Our Practitioners play a key role in performing health checks, yarning appointments, shared medical appointments, triage processes and care plans across our main clinic, outreach centres, and discrete programs such as the Diabetes Reversal in Aboriginal Women program.

We know that westernised diseases have the biggest impact, so we work to decolonise our own institution. We do this by operating in line with our own ways of knowing, being and doing, and providing continuous cultural care which caters to the mental, physical, and spiritual needs of our community. For example, our women can access Bushflower Essence medicines, which have healed our communities for thousands of years. We have decolonise Mental Health Care Plans, turning them from discussions about mental illness to a plan for improving holistic wellbeing. We also run Birthing on Country Programs, cultural safe healing counselling, and many other services. Our Aboriginal Health Practitioner team is key to all these programs. They administer clinical care and facilitate the space and connections required to build trust.

We see a lot of locum doctors and nurses come through our clinic. We know that this only works for our community because continuity of care is provided through the Aboriginal Health Practitioner. The community trusts in our Aboriginal Health Practitioners, who then act as a conduit, providing care themselves and simultaneously facilitating a relationship with whichever locum is on-site at the time.



**"I envision a health system where Aboriginal Health Practitioners run, lead and guide care spaces. Where they are remunerated fairly for their work."**



I assist the Aboriginal Health Practitioner team with these tasks, ensuring they are supported to work to their targets, that they are happy and fulfilled, and that they have access to professional development and mentoring. They choose their areas of passion and interest, and we facilitate their growth in that direction. I also work on strategic planning and help to design and grow our spaces to ensure they are culturally safe.

I envision a health system where Aboriginal Health Practitioners run, lead and guide care spaces. Where they are remunerated fairly for their work. Where mainstream organisations support them and embed them as vital components of their care teams. Where they can hold valuable, professional long-term careers as Health Practitioners, but also be supported to study medicine or nursing if they choose.

Our women are the most underrated, amazing, beautiful people on the face of this planet, and I work with the deadliest Aboriginal Health Practitioner team. We would not be able to do this work without them. I look forward to continuing to support these young people to be where they want to be. I want them to take care of themselves, to know they are so valuable and worthy, and to achieve the dreams they had when they were girls."





# Professional Support and Development for Members

**Objective:** To improve the accessibility and quality of professional support and professional development opportunities for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners.

Professional support and development are key to ensuring the skills and knowledge of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners evolves in line with community need and advancements in healthcare. NAATSIHWP has consequently sought to increase its focus on this objective. This report demonstrates that over the past year we have worked to strengthen our existing suite of professional support and development initiatives and started exploring new opportunities.

## Professional Development Forums

In terms of continuing initiatives, NAATSIHWP delivered 10 professional development forums over the year. With travel restrictions lifted nine forums were held on Country in Alice Springs, Bamaga, Thursday Island, Mackay, Ballina, Port Lincoln, Kalgoorlie, Dubbo, and Shepparton. An online session was also delivered to staff working in the Torres and Cape Hospital and Health Service. Topics covered were tailored to place and included negotiating a scope of practice, recognising disinformation, cultural safety, opportunities for continuing professional development and self-care.

NAATSIHWP forums are free to attend and designed to provide opportunities for networking, the sharing of knowledge and up-to-date information about changes in practice and policy that directly affects the workforce.

## Tailored training

In a similar vein, we maintained a focus on ensuring Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners can access training and health resources designed to their needs. We worked with several stakeholders to improve the quality of professional development opportunities for our workforce in areas including:

- > quitting smoking in pregnancy
- > Hepatitis B
- > chronic pain
- > culturally and clinically safe models of care
- > palliative approaches and care.

As part of related work, we collaborated on a project led by the Australasian Society of HIV, Viral Hepatitis and Sexual Health Medicine to produce a Syphilis Decision Making Tool. This comprehensive and up-to-date resource will help to prevent transmission and protect clients and community by enabling Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners to better understand and communicate the signs, symptoms, testing and management of syphilis.

Through our role on the Advisory Group for Australian Diabetes Educators we supported the development of a Capability Framework for Diabetes Care and participated on a Steering committee led by Children's Health Queensland that produced a Needs Analysis for improving prevention, early diagnosis and management of prediabetes and type 2 diabetes in Queensland Aboriginal and Torres Strait Islander children and youth.





Thursday Island, Queensland



Dubbo, New South Wales



Mackay, Queensland



Port Lincoln, South Australia



Thursday Island, Queensland



Bamaga, Queensland



Shepparton, Victoria



## Stronger together, now more than ever!

Our biennial National Conference was held on Gadigal Country on 9–11 November 2022, at Rydges World Square Hotel in Sydney. The theme, *“Stronger together, now more than ever!”* recognised the strength and courage of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners during the pandemic and that they emerged stronger from the experience.

The event brought together over 240 delegates from Countries across Australia. Keynote speakers included Professor Roianne West, Professor Chelsea Watego, LaVearne Belleair, Janet Stajic, Robert Skeen, Vicki Wade and Paul Callaghan. Topics ranged from the history of the Redfern Aboriginal Medical Service, the importance of culture, mental health, and the centrality of anti-racism in culturally safe care.

During the conference NAATSIHWP members had the chance to showcase their work across 10 presentations. Highlights included Rachal Allan sharing the success of her work on the Cronulla Sharks Deadly Choices Program, Shaun Tatipata with an energetic and interactive overview of the Deadly Vision Centre, and young leader Kalinda Wills on the Waminda Diabetes Remission in Aboriginal Women program.

The conference culminated in the NAATSIHWP Gala Ball, with entertainment from Mary G and Emma Donovan. The evening was a celebration of the workforce, and included the announcement of the recipients of the 2022 NAATSIHWP Excellence Awards:

- > Jacinta Tatipata - Young Warrior Excellence Award (sponsored by Remote Area Health Corps)
- > Trumaine Rankmore - Individual Champion Excellence Award (sponsored by Kennedy Law)
- > Waminda, Models of Care and Career Pathways - Innovation Excellence Award (sponsored by CranaPlus)
- > Aunty Karen West - Workforce Legend Award (sponsored by Lowitja Institute)
- > Professor Roianne West - Lifetime Achievement Award (sponsored by Cancer Australia)

The conference provided a great opportunity for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners to come together to share their successes and support one another. This sentiment was shared by all participants, with the overwhelming majority reporting high levels of satisfaction with the event in our post-conference survey.

We would like to thank all keynote speakers, member presenters, sponsors, and delegates for helping to make the event an overwhelming success.

NAATSIHWP is looking forward to bringing the workforce together once again for its National Symposium on Kaurna Country at the Adelaide Convention Centre, over 24–25 October 2023







Caption XXX



Ngumpie Weaving



LaVerne Belleair



Excellence Award Winners



Ngumpie Weaving finished artwork



Some of our workforce presenters

## Continuing Professional Development

In 2022-23 NAATSIHWP continued its focus on the Continuing Professional Development (CPD) that Aboriginal and/or Torres Strait Islander Health Practitioners are required to complete at least 20 hours of CPD training each year. To help members understand their CPD requirements and maintain registration we promoted our [Continuing Professional Development Guide](#). NAATSIHWP maintains a CPD register that Aboriginal and/or Torres Strait Islander Health Practitioners can access to easily manage and report on their CPD activities.

After finalising our review of the CPD Endorsement Program we received a significant increase in applications for endorsement demonstrating both the interest of various health stakeholders in supporting the professional development of Aboriginal and/or Torres Strait Islander Health Practitioners, and the breadth of clinical tasks that this profession can perform. A total of 30 training programs were endorsed on topics including:

- > Sexual health and sexually transmitted infections
- > Burn assessment
- > Hepatitis
- > Medicines use
- > Chronic pain
- > Mental health and emotional wellbeing
- > Palliative care
- > Smoking
- > Kidney disease
- > Rheumatic heart disease
- > Transfer of care

We commend Aboriginal and/or Torres Strait Islander Health Practitioners for their commitment to CPD and recognise the work they undertake to strengthen their knowledge and expand their scope of practice. Due to their commitment, we are now starting to see roles and specialisations for Aboriginal and/or Torres Strait Islander Health Practitioners starting to emerge in a diversity of settings including emergency medicine, intensive care, cardiac care, renal care, and maternal and infant care. The primary health care skills gained through qualifications proving a solid foundation for growing skills and knowledge in any number of clinical and acute care setting.

## Review of National Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner Qualification Framework

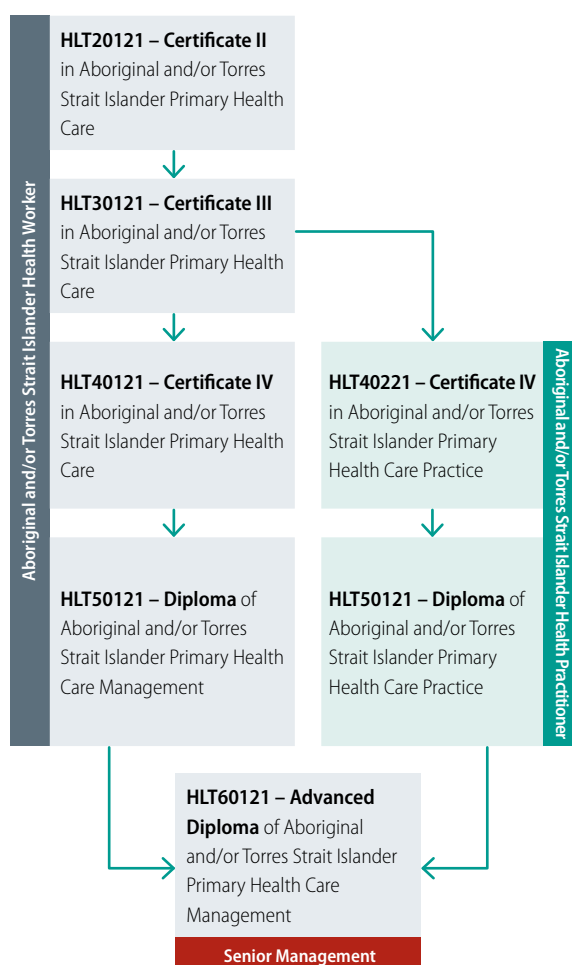
The five-yearly review of the National Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner Qualification Framework was finalised in December 2022. The qualifications approved following this review are outlined in the following diagram.

The Framework provides:

- > graduated pathways for those pursuing careers in either community health, clinical practice or management and leadership positions,
- > a benchmark for what Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners with different qualifications are educated and able to perform and
- > steps to ensure a qualified, skilled, and competent workforce.

As part of each qualification graduates receive practical, primary health care training.

### National Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner Qualification Framework endorsed December 2022







## Mentor training

In terms of new initiatives, the work to test and refine the new NAATSIHWP Mentor Training program continued across the course of the year. The program was initially piloted in Darwin after being revised in line with participant feedback it was delivered in Broome; following this the Professional development team trialled the delivery of the program online to a group of Aboriginal and/or Torres Strait Islander Health Practitioners from Queensland. The training covered topics such as:

- > strength-based approaches and practice
- > appreciating and building resilience
- > embedding cultural safety into the workplace
- > healthy mentor and mentee relationships

The Mentor Training has been a great success and we welcomed 12 new NAATSIHWP Mentors across the year. The program recognises that Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners continue to experience a range of barriers to entry and effective participation, and often carry additional cultural loads. Encouraging mentorship roles and relationships enables the workforce to access peer-to-peer support and it is anticipated that NAATSIHWP will increase focus on expanding this program over coming years.



## Leadership program

NAATSIHWP is committed to supporting the career development and leadership journeys of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners across Australia and, as one of our initiatives, the team commenced scoping the parameters of a leadership program.

The program recognises that many of our members occupy leadership roles without adequate support or opportunities for career development and advancement tailored to their needs both from a cultural or leadership perspective. The development of a leadership course provides an opportunity to strengthen these skills. It recognises that leadership is an essential skill for those who work within complex health systems and communities, and that effective leadership is critical to ensuring the delivery of policies, programs and services that better meet the needs of Aboriginal and Torres Strait Islander people.

The NAATSIHWP Leadership Program will support participants to become more effective leaders and take their careers towards the Executive level. It will build on current leadership and management capabilities, be developed, and delivered through a cultural lens, be strengths based and encourage participants to reflect on their life journeys. It is expected that the new program will be ready for piloting in the 2023–24 financial year. All those interested please keep your eyes on the [NAATSIHWP website](#) for further details.

# Championing change and innovation



Jaydene Burzacott is an Arabana woman from South Australia. She grew up in Mount Gambier, South Australia and Darwin, Northern Territory. She now lives on the lands of the Dja Dja Wurrung people, Bendigo. She is an Aboriginal Health Practitioner and Practice Manager at Bendigo & District Aboriginal Co-operative (BDAC). Jaydene is the first Aboriginal Health Practitioner to be qualified to administer Fluoride Varnish to children in Victoria.

"I completed an Aboriginal and Torres Strait Islander Health Worker Traineeship with BDAC in 2012, and completed my Health Practitioner training in 2015. I'm now a Practice Manager, and I'm responsible for managing the clinic, nurses, GPs, chronic care team, Aboriginal Health Practitioners, and the medical admin team.

I became a Practice Manager because I could see there was an opportunity to enhance my skills and knowledge. I could also fill a gap with my deep understanding and experience with BDAC. I have a vision for the way health care could be provided to community, and I saw this position as a way to implement the strategic change required to get there.

Aboriginal Health Practitioners are critical to our work at BDAC. They build community confidence and keep patients coming back to the clinic. They assist with health assessments and follow-up testing and care, including taking bloods. Our Practitioners ensure patients receive ongoing, holistic care, and have increased testing rates at the clinic significantly. They support our whole team and are the glue that holds the clinic together.

I am very passionate about Aboriginal Health Practitioners being enabled to work to their full scope of practice. At BDAC, we recognised an opportunity to expand our scope in relation to dental care. With high intake of sugary drinks and foods within community, dental decay on the rise in children and poor access to culturally safe dental services, access to regular application of fluoride varnish is important to prevent tooth decay in the future.

We know families and children are more likely to attend an Aboriginal Health Practitioner they know and trust, so it is important that Aboriginal Health Practitioners are able to capitalise on this and provide dental care in addition to other services. Aboriginal Health Practitioners are easy-going and flexible in the services they provide; they're able to provide care in a safe and comfortable way, even if that means sitting down on the floor with a child, treating siblings at the same

time, or attending schools or kindergarten's for class-wide treatment.

However, at the time, the Victorian Medicines and Poisons laws prevented Aboriginal Health Practitioners from administering fluoride varnish. In response, Dr Rahila Christian, Dallas Widdicombe and other key individuals led a years-long campaign to change the law. In 2022 they were successful, and I ended up being the first Aboriginal Health Practitioner who was able to apply fluoride varnish in Victoria. I jumped at the opportunity to complete the training, both for my Aboriginal Health Practitioner colleagues, and all the people that worked hard to create the change.



**"Oral health impacts on all areas of health, and so being able to protect our kid's teeth and educate families on oral health creates a change that will have an impact on generations to come."**



Being able to apply Fluoride Varnish to our children is an act of self-determination. We have shown that we know what's best for our community, we know how to deliver services, and we know how to achieve outcomes. We've been doing it for years. Oral health impacts on all areas of health, and so being able to protect our kid's teeth and educate families on oral health creates a change that will have an impact on generations to come."

## SECTION 3

# Representation and Promotion of Workforce Needs

**Objective:** To increase our influence in the development and implementation of Aboriginal and Torres Strait Islander health policies and programs relevant to the workforce.

After years of effort from our organisation, members, and other key stakeholders it is gratifying to see an increased focus on and valuing of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions emerging across the health care system. Together we are successfully embedding the voices of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners in health policies and programs, growing a strong and skilled professional identity and improving the mainstream understanding of the roles.

While we represent and promote the workforce on an ongoing basis throughout the year, the following provides an overview of our key achievements in this area.

## Ambassadors program

After working to recruit both National and Professional Ambassadors in the 2021–22 financial year we were excited to finally launch our Ambassadors Program. Our eight ambassadors are positioned to help to raise the professional profile and recognition of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce, as well as shine a light on the valuable and critical role our professions play in health care.

### Our National Ambassadors of NAATSIHWP

#### Emma Donovan

Emma is an ARIA-nominated, award winning Indigenous singer and songwriter best known for her work with soul band, The Putbacks and being a founding member of The Black Arm Band project. Emma has



toured and recorded with the best in the Australian music scene including Paul Kelly, The Teskey Brothers, Yothu Yindi, Kee'ahn, The Meltdown, Paul Grabowsky, Jen Cloher, Spinifex Gum and the late Uncle Archie Roach and Aunty Ruby Hunter. Emma is part of the famed Donovan family of singers of the Gumbaynggirr people. On her Father's side, Emma is of the Yamatji people

#### Dan Bouchier

Dan is a multi-award-winning journalist with the ABC. He presents Breakfast on ABC Radio Canberra, and anchors ABC Canberra's 7pm news. Dan grew up in the outback Northern Territory mining town of Tennant Creek and began reporting for the local newspaper when he was 14, going on to work for the NT News. His younger years in Tennant Creek, together with his coastal Victorian Aboriginal heritage, have instilled in him a deep interest in the culture, history and social justice issues of Australia's First Nation people



#### Sean Choolburra

Sean is one of Australia's funniest and most enduring Aboriginal comedians. He is a proud Girramay, Kalkadoon, Pitta Pitta and Gugu Yalanji man and a dancer who found his feet in stand-up comedy with a long 25+ year career in the entertainment industry. Weaving his inimitable blend of traditional dance, didgeridoo, story, knowledge and humour, he never fails to captivate his audiences. He has recently hosted his own TV series, Express Yourself on NITV, and special guest roles on ABC's Playschool, Bluey and Black Comedy.





## Rachael Hocking

Rachael Hocking is a Warlpiri woman from Lajamanu, currently living on Gadigal land in Sydney. She is a journalist, curator and presenter who is passionate about sharing First Nations stories. Her work can be found across Black media, from the national Indigenous newspaper Koori Mail to NITV. She is a director on the board for the Dart Centre for Journalism and Trauma in the Asia Pacific, and Common Ground.



### Our Professional Ambassadors of NAATSIHWP

## Dr Janine Mohamed

Janine a proud Narrunga Kurna woman from South Australia. Over the past 20 years, Janine has worked in nursing, management, project management, research, workforce and health policy in the Aboriginal and Torres Strait Islander health sector. In 2021, Janine was awarded a Doctorate of Nursing honoris causa by Edith Cowan University in January 2020 and a Distinguished Fellowship by The George Institute for Global Health Australia. Janine is the CEO of the Lowitja Institute – Australia's National Institute for Aboriginal and Torres Strait Islander Health Research.



## Professor Roianne West

Professor West was born and raised in Kalkadoon on her grandmother's ancestral lands with connections to the Djunke/Djaku-nde peoples. Her journey began as an Aboriginal Health Worker under the mentorship of her mother. She was Australia's first Nursing Director in a tertiary hospital with a dedicated portfolio of Indigenous Health, and Australia's first Professor of Indigenous Health, Foundation Chair, Director and the inaugural Dean of First Peoples Health at Griffith University. Roianne is the CEO of the Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM).



**"The importance of being an Ambassador is about ensuring our workforce is recognised and heard in this country. Being able to support new Aboriginal and/or Torres Strait Islander Health Workers in their role to take care of our mob in the way that works for us, it's important that our workforce know their worth and that this is a career, it doesn't need to be a path into nursing."**



**Hayley Longbottom**

*Professional Ambassador for NAATSIHWP*

## Janet Stajic

Janet is a Yidinji Jirrbal woman of Far North Queensland who grew up in Brisbane. She is an Aboriginal Health Worker currently undertaking a PhD at the University of Queensland. Janet has also worked in program management, policy, and health and medical research and her current research on the Aboriginal and Torres Strait Islander Health Worker and Practitioner workforce aims to bring better understandings and greater recognition of this workforce.



## Hayley Longbottom

Hayley Longbottom is a Jerrinja Cullunghutti Wandj Wandandian woman, located on the South Coast of NSW, with song lines to Kamilliroi. She is the Executive Manager of Health and Wellbeing at Waminda South Coast Women's Health and Welfare Aboriginal Corporation and has worked as an Aboriginal Health Worker. She is passionate about the wellness of her community and standing side by side our women and their families on their journey to healing, nourishing and thriving.



NAATSIHWP thanks our Ambassadors for their commitment to Aboriginal and Torres Strait Islander health and their willingness to give time and expertise to promote the essential work of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners.

As part of the program, the Ambassadors have:

- > promoted the National Day of Recognition for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners,
- > supported and participated in the NAATSIHWP National Conference that was held in November 2022, and
- > advocated for the workforce and NAATSIHWP across their own networks.

Several of our Professional Ambassadors began their careers as, or are currently, Aboriginal Health Workers or Health Practitioners. They helped forge the path for subsequent colleagues, and continually champion their peers today through positions of leadership, mentoring, research and working with our communities.

We know the workforce are proud to have such accomplished, passionate leaders championing their work, and we look forward to continuing our work with the support of these Ambassadors next year.

## National Day of Recognition 2022

Our National Day of Recognition for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners is quickly becoming our annual cornerstone. The second National Day of Recognition held on 7 August 2022 was an incredible success. The day provided an opportunity to celebrate and showcase the extraordinary work and achievements of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners across Australia.

NAATSIHWP amplified the voice of the workforce by sharing videos and quotes from Aboriginal and Torres Strait Islander Health Workers and Practitioners across the nation. NAATSIHWP Ambassador and prominent ABC Journalist Dan Bouchier interviewed five workforce members about their work, passions, and what the National Day of Recognition means to them. Thank you to Rachal Allan, Shaun Tatipata, Kim Moffit, Patrick Jagamarra Ahkit and Kristika Kumar for sharing your stories.

Here in Canberra, NAATSIHWP staff celebrated the workforce over afternoon tea. Health services and workplaces across the country did the same, celebrating their Health Workers and Practitioners with BBQs, cake, speeches, and movie screenings.

*"It has been such a rewarding journey being able to know that our mob is getting the help they need so they can have a better life. I know that this is the least I can do but if I can help at least one person, then I have successfully achieved my personal goal."*

**Lynese Hari, Gunggandji person**  
*Yarrabah Aboriginal Community Coordinator*

*"My only satisfaction in my role is having positive feedback on how I have helped families and if there anything I can do to assist, if they are happy, then I am."*

**Irene Nicholls**  
*Southern Kaantju/Wuthathi, Aboriginal and Torres Strait Islander Health Practitioner*

*"...there has never been an Aboriginal Liaison Officer here (Auburn Hospital), so I am setting up and ensuring the Aboriginal community has direct contact with me, and making the community feel welcome and make sure the services are culturally appropriate."*

**Michelle Pearce**  
*Aboriginal Health Practitioner*

*"My passion is helping our mob improve and understand their health concerns and start being proactive in maintaining a healthy lifestyle and living long health lives. I love being a health worker at around level working with our Mob."*

**Lorna Pai, Widi and Meriam People**  
*Health Practitioner/Advanced Health Worker*



## Continuing demand for engagement

The continuing demand for our participation in policy making fora validates our success in this area. It demonstrates that NAATSIHWP plays a critical and lead role in expanding, regulating, and developing the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner professions and is becoming a recognised and influential national peak organisation.

Over the year we provided ongoing representation through participation in over 30 working groups or steering committees all aiming to improve the health outcomes of Aboriginal and Torres Strait Islander people through the roles of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners. Through this work we influenced the direction of many national and state level initiatives and worked to ensure the health care system better meets the needs of Aboriginal and Torres Strait Islander people.

## Nation-wide workforce representation

NAATSIHWP understands the importance of representing and promoting the workforce at a grass roots community level. We visit as many large gatherings of Aboriginal and/or Torres Strait Islander people as possible, providing sponsorships, holding information booths, and giving presentations in order to increase nation-wide understanding and utilisation of the workforce.

Across the 2022–23 financial year, NAATSIHWP represented the workforce at events including the:

- > Lowitja Conference
- > opening of the 47<sup>th</sup> Federal Parliament
- > Garma Festival
- > Koori Knockout
- > Indigenous Allied Health Australia (IAHA) National Conference
- > National Indigenous Legal and Health Justice Conference
- > IAHA ACT Health Academy Graduation
- > Northern Territory Health Aboriginal and/or Torres Strait Islander Health Worker and Practitioner Excellence Awards
- > National Rural Health Conference
- > Barunga Festival
- > Congress of Aboriginal and Torres Strait Islander Nurses and Midwives (CATSINaM) Conference
- > Deadly Cup Carnival
- > World Indigenous Peoples' Conference on Education
- > Murri Carnival
- > Australian Indigenous Doctors Association (AIDA) Conference
- > National Aboriginal Community Controlled Health Organisation (NACCHO) Conference
- > Yabun Festival
- > NSW Ministry of Health's Stepping Up Forum
- > NACCHO National Summit
- > Aboriginal Health Council of Western Australia Conference
- > Common Threads Summit

We are both proud and grateful that we were able to support the exceptional work of other organisations throughout 2022-23. Together, we are advocating for positive change towards Aboriginal and Torres Strait Islander people's health and wellbeing.





AHCWA Conference



Barunga Festival



AIDA Conference



IAHA Conference



AIDA Conference



Lowitja Conference

# Building the New

**Tahnee Hooper** is a proud Kamilaroi woman who was born and raised in Toowoomba. She is the Aboriginal and Torres Strait Islander Health Worker Professional Lead at Darling Downs Health Aboriginal and Torres Strait Islander Health Service, Queensland. Tahnee was awarded Indigenous Student of the Year at TAFE Queensland Toowoomba in 2022 after completing her Diploma of Aboriginal and/or Torres Strait Islander Primary Health Care. She has been instrumental to the successful embedding of the workforce as a vital component of the health system in her area.

I became an Aboriginal and Torres Strait Islander Health Worker because I wanted to be able to support, advocate and play a role in reducing health disparities for Aboriginal and/or Torres Strait Islander people and communities. I strongly believe everyone has the right to be healthy and to be given the opportunity to achieve their highest level of health. The community, my family, my children, and past experiences in my life were all influential in my journey into health care.

In my current role as the Aboriginal and/or Torres Strait Islander Health Worker Professional Lead, I work at a senior level to provide support to Aboriginal and/or Torres Strait Islander Health Workers, Health Practitioners and Liaison Officers employed within the Darling Downs Health region. I am responsible for leading and implementing the Darling Downs Health Aboriginal and/or Torres Strait Islander Workforce Professional Governance Model.

Recently in the Darling Downs Hospital Health Service we were extremely proud to recognise five members of our team who were clinically assessed as Aboriginal and/or Torres Strait Islander Health Practitioners within the Toowoomba Emergency Department. Their competency assessments, along with their Practice Plans, will guide their clinical, holistic patient centred care. The Aboriginal and Torres Strait Islander Health Practitioners will be based in Dalby and Cherbourg.

It is fantastic to see our Aboriginal and/or Torres Strait Islander Health Practitioners supported by clinicians to help achieve health equity and to provide a culturally safe environment for Aboriginal and Torres Strait Islander patients accessing health care. The clinical assessment training will be ongoing as we continue to work towards embedding our Aboriginal and/or Torres Strait Islander Health Practitioners and Health Workers to work clinically across the Darling Downs Health Service.

In the future, I hope to see more Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners working on the ground to the top of their scope. Being a part of growing our workforce and recruiting passionate Aboriginal and Torres Strait Islander people to our team is extremely rewarding and fulfilling and I am very excited to see growth in myself and especially in our workforce.



**"In the future, I hope to see more Aboriginal and Torres Strait Islander Health Workers and Health Practitioners working on the ground to the top of their scope."**



Over the next couple of years there will be a lot of change embedded into our Health Services for our communities and staff members. I believe it is possible to improve health outcomes of Aboriginal and Torres Strait Islander people if we welcome change.

*"The secret of change is to focus all of your energy not on fighting the old, but on building the new." – Socrates*







## SECTION 4

# Recruitment and Retention of the Workforce

**Objective:** To increase our influence in the development and implementation of recruitment and retention strategies for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners.

To help ensure Aboriginal and Torres Strait Islander People have access to culturally safe and responsive health care regardless of where they are accessing health care services, we increased our focus on supporting the recruitment and retention of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners in Aboriginal Community Controlled Health Services, Government Hospitals and Health Services and Private Practice.

Given our expertise in this area, we are increasingly being engaged by key stakeholders to lead projects that provide culturally safe and secure career pathways and will result in the professions being embedded as a vital, strong, and valued resource within a broad range of health care teams.

## Proposing a career structure for SA Health

The Department of Health and Wellbeing in South Australia, for example, engaged us to undertake a comprehensive review the Aboriginal and/or Torres Strait Islander Health Practitioner profession within their hospitals and health services. As part of this work, NAATSIHWP:

- > produced a discussion paper to highlight the national landscape and strategic directions of the workforce
- > facilitated broad ranging consultations to gauge the status and identify opportunities and barriers to the recruitment and retention of the workforce
- > proposed a career structure providing career pathways from entrance to executive level for both professions.

This work recognised the interrelated nature of the Aboriginal and/or Torres Strait Islander Health Practitioner professions and how they work together to provide an entry and long-term career or succession pathway into the health care system. Recommendations for implementation were included, and we look forward to South Australia Health's response.

## Tailored mentoring and support program for Queensland Health

We were contracted to work with Aboriginal and/or Torres Strait Islander Health Practitioners, their supervisors, and relevant stakeholders to co-design, implement and develop a Mentoring and Support Program to improve the recruitment, retention and recognition of Aboriginal and/or Torres Strait Islander Health Practitioners within Queensland's Hospital and Health Services.

The primary objective of this project was to grow a shared understanding of the skills, training, roles, and regulatory requirements of Aboriginal and/or Torres Strait Islander Health Practitioners and ensure that the roles are being effectively leveraged to improve the health and wellbeing outcomes of Aboriginal and Torres Strait Islander people.

As part of the project:

- > a needs analysis was conducted
- > information sessions were provided to supervisors and staff
- > a Community of Practice was established
- > professional development and support strategies were delivered and
- > a monitoring, evaluation and learning framework was developed.

## Professional development and career pathways

The work in South Australia and Queensland both highlighted the:

- > the commitment and resilience of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce
- > the considerable inconsistency that exists across Australia in terms of roles, scopes of practice and professional utilisation and
- > broad scale lack of awareness and understanding amongst mainstream health professionals in relation to the qualifications, skills, roles, scope of practice and registration requirements applicable to the workforce.

We would like to thank the SA Department of Health and Wellbeing and Queensland Health for their commitment to the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce and their pursuit of professional development pathways for these roles. They are playing a lead role in reforming the delivery of health care services and ensuring that Aboriginal and Torres Strait Islander people have access to culturally safe and responsive health care across all government hospitals and health services in their states.

## Combatting racism

This work also reinforced that the provision of culturally safe working environments is critical to the recruitment and retention of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners. NAATSIHWP remains actively involved in several long-term sustainable initiatives to eliminate racism and embed culturally safe practice across the health and social services sectors.

We are particularly proud of our ongoing involvement in the implementation of the [National Scheme's Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020-2025](#) administered by Ahpra. This work is leading to considerable reform across the health care sector and, aims to achieve health equity and eliminate racism from the health system by 2031.

Under this work changes to national law introduced in October 2022, for example, means that the National Registration and Accreditation scheme now includes a focus on ensuring Australia's health workforce contributes to the elimination of racism and is responsive to the health needs of Aboriginal and Torres Strait Islander peoples. All 800,000 health practitioners registered with Ahpra are required to take steps to learn about racism, how it manifests, the harm it causes, and how it can be prevented through culturally safe practice and models of care.

The change means that:

- > Aboriginal and Torres Strait Islander people accessing health care services can expect that health care provision from a registered health practitioner is culturally safe and free of racism
- > if the care they receive fails to meet this expectation they have a right to notify AHPRA by submitting a complaint, and
- > if the complaint enters the court system, cultural safety must be considered.

To find out more, view the joint statement between Ahpra, the [Aboriginal and Torres Strait Islander Health Strategy Group](#) and the [National Health Leadership Forum](#) [here](#).

## The Partnership for Justice in Health

NAATSIHWP continues to play a lead role in an alliance established to improve Aboriginal and Torres Strait Islander peoples' outcomes by addressing racism at individual, institutional and systemic levels, specifically focusing on the health and justice systems.

NAATSIHWP is the co-chair for the Partnership for Justice in Health (P4JH) and provides secretariat support. As well as maintaining day to day activities, we oversaw the roll-out of the 'Your Health Rights' initiative. This initiative saw the P4JH producing and distributing hard copy posters and postcards to hospitals and health services across the nation, providing healthcare consumers with an accessible resource about their rights while interacting with the healthcare system.

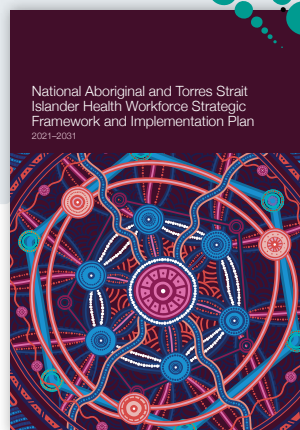
Since the roll-out of this resource, P4JH has received consistently positive feedback from Aboriginal and Torres Strait Islander peoples, regarding how these resources have supported their self-determination in accessing appropriate healthcare.

## Supporting students and maintaining high standards of training

To support the recruitment and retention of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners we also undertook a range of initiatives to help secure a pipeline of new recruits and ensure that our students make successful transitions into the workforce. Our work in this area included:

- > playing a strong role in the five yearly review of the Aboriginal and /or Torres Strait Islander Health Worker and Health Practitioner qualification framework to ensure qualifications and skills met the health needs of the Aboriginal and Torres Strait Islander population
- > maintaining strong relationships with the Registered Training Organisations responsible for delivering Aboriginal and /or Torres Strait Islander Health Worker and Health Practitioner qualifications
- > promoting careers and supporting students through membership, the provision of bursaries, sponsorships, and advice and
- > partnering with key stakeholders on the articulation of Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner qualifications on to other qualifications.

The ongoing growth of our student memberships and high numbers of course enrolments effectively validate the combined success of these initiatives.



## Maintaining advocacy for the full implementation of the National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031

Throughout the year we worked in solidarity with, AIDA, IAHA and CATSINaM to maintain a focus on the full implementation of the [National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031](#).

This comprehensive plan endorsed by all Australian Governments in March 2022 was codesigned in partnership with Aboriginal and Torres Strait Islander health leaders and seeks to address the structural, systemic, organisational, and personal barriers to recruiting and retraining Aboriginal and Torres Strait Islander people across the health landscape. While individual actions to progress initiatives outlined in the plan are underway, a comprehensive and coordinated approach to the plans implementation has yet to be forthcoming.

The strategic directions and implementation strategies included in the Workforce Plan are key to taking the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce forward and we continued to work in partnership with our sister organisations to secure the investment and commitment required for the Workforce Plan's effective implementation.

Our joint advocacy for this work was emphasised during the Aboriginal and Torres Strait Islander Health Ministers' Roundtable held on Kaurna Country at the Adelaide Convention Centre in October 2022. During the roundtable the national peak health workforce organisations drew attention to the fact there has been limited proportional growth in the Aboriginal and Torres Strait Islander Health workforce over the past 20 years. With a growing Aboriginal and Torres Strait Islander population the implementation of the Plan is critical to improving health outcomes and must be

prioritised.

## 2020-2023 Strategic Plan Impact

As we come to the end of the 2020-2023 NAATSIHWP Strategic Plan, we reflect on the success and impact of NAATSIHWP since 2020.

NAATSIHWP's Strategic Plan was launched at the beginning of the global COVID-19 Pandemic. Even at that early stage, it recognised the critical role our workforce would play in the COVID-19 Response, and the challenges that we may have to overcome as an organisation. Despite this uncertainty, the Strategic Plan charted a course forward, to ensure the Aboriginal and Torres Strait Islander Health Worker and Practitioner workforces not only survived the pandemic but continued to grow despite it. Our 2020-2023 Strategic Direction has been:

*To improve understanding in the health system of the role, scope and effective deployment of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, as a vital and valued component of a strong professional Aboriginal and Torres Strait Islander health workforce needed to close the gap in health outcomes for Aboriginal and Torres Strait Islander Australians.*

This Strategic Objective was underpinned by four key strategic focus areas:

1. Scope of Practice for the workforce
2. Professional support and development for the workforce
3. Representation and promotion of workforce needs
4. Recruitment and retention of the workforce

Each year of the Strategic Plan, NAATSIHWP has reported on these focus areas in our Annual Reports, allowing us to track the key actions taken in line with each. The following table is an overview of the key achievements across the last three years.

### Key NAATSIHWP achievements 2020–23

#### Scope of Practice for the workforce

- > Launching the National Framework for Determining Scope of Practice
- > Distributing best practice exemplars
- > Implementing emergency orders that temporarily enabled Aboriginal and/or Torres Strait Islander Health Practitioners to administer COVID-19 vaccinations as part of operation COVID shield
- > Developing of nationally consistent scopes of practice for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners and the harmonisation of medicines authorities included in the National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework and Implementation Plan 2021-2031
- > Funding to lead the delivery of a national consultation process to help determine what standardised scopes of practice and harmonised drugs and poisons legislation for the professions should include and involve

#### Professional support and development for the workforce

- > Professional Development Forums in 27 locations
- > Establishing of RTO network
- > Symposiums & Conferences:
  - 2021 – 10 year Anniversary Conference 'A decade of footprints, driving recognition'
  - 2022 - Virtual Professional Development Symposium
  - 2023 – National Conference, 'Stronger together, now more than ever!'
- > Supporting emergency response to COVID-19
- > Piloting and rollout of mentoring program
- > Significant growth in CPD Endorsement program
- > Ongoing involvement in development of training courses and work specific resources
- > Supporting 5 yearly review of National Qualification Framework

## Key NAATSIHWP achievements 2020–23

Representation and promotion of workforce needs	<ul style="list-style-type: none"> <li>&gt; Successful launch and growth of the NAATSIHWP National Day of Recognition for Aboriginal and Torres Strait Islander Health Workers and Practitioners</li> <li>&gt; Finalising of negotiations on the Modern Award, with major wins for the workforce: <ul style="list-style-type: none"> <li>- a new grade structure</li> <li>- recognition of prior service</li> <li>- new provisions for rest breaks in extreme heat, and ceremonial leave</li> <li>- new allowances, including Telephone Allowance, Nauseous Work Allowance, Blood Count Allowance, Replacement, Cleaning, or Repair to Damaged Clothes Allowance, and Medication Administration Allowance</li> <li>- the Modern Award applies to workforce in private practice, as well as those in community-controlled organisations</li> </ul> </li> <li>&gt; Developing and launching Ambassadors program</li> <li>&gt; Celebrated 10 years of registration</li> </ul>
Recruitment and retention of the workforce	<ul style="list-style-type: none"> <li>&gt; Launching the Partnership for Justice in Health, NAATSIHWP as a founding member, continuing as a Co-Chair and Secretariat</li> <li>&gt; Ongoing support for the implementation of the <a href="#">National Scheme's Aboriginal and Torres Strait Islander Health and Cultural Safety Strategy 2020-2025</a></li> <li>&gt; Sponsorship of Northern Territory Aboriginal and/or Torres Strait Islander health Worker and Health Practitioner Excellence Awards</li> <li>&gt; Commencing review of the NAATSIHWP Cultural safety Framework</li> <li>&gt; Recommending career structure for South Australian Department of Health and Wellbeing</li> <li>&gt; Developing Tailored Mentoring and Support Program for Queensland Health</li> </ul>
Governance and operations	<ul style="list-style-type: none"> <li>&gt; Name change in 2021</li> <li>&gt; Registering under the Australian Charities and Not-for-profits Commission as a Health promotions charity, 14 October 2021</li> <li>&gt; Achieving 1000 and 2000 member milestones</li> <li>&gt; ISO9001 certification</li> <li>&gt; Securing future funding</li> <li>&gt; Establishing consultancy arm</li> </ul>

The growth of NAATSIHWP is also reflected in the growth of our membership.

Membership category	2020	2023	Increase
Full Members	960	1169	22%
Associate Members	130	939	42%
Students	769	184	22%
Friends Membership	387	489	26%
<b>Total</b>	<b>2246</b>	<b>2781</b>	<b>24%</b>

Notwithstanding these achievements there remains much work to do. The Strategic Plan 2024-2027 will chart a course for further growth and professionalisation of the Aboriginal and/or Torres Strait Islander Health Worker and Practitioner Workforce.



# Delivering Culturally Safe and Responsive Care for Wunan Health

**Wayne Beddall** is an Aboriginal Health Practitioner from Halls Creek and has Gija, Djaru, Noongar, Irish and Italian heritage. Having completed his training at KAMS School of Health, he has been working as a Health Practitioner for 20 years. He currently offers services at Wunan Health and Well-Being Centre in Kununurra, Miriwoong Country. As well as a Health Practitioner, Wayne is the Health Programs Manager and has been implementing National Disability Insurance Scheme programs as well as a new chronic disease program.

**Shaun Cox** is a proud Gija and Djaru man with his family coming from Halls Creek. He has been working as an Aboriginal Health Worker at the Wunan Health and Well-Being Centre since December last year and has already become an indispensable part of the team.

## What makes Wunan Health special compared to the other health services in Kununurra?

**WB** I have been with Aboriginal Medical Services for about 20 years, and I've found that Wunan Health is a great place to work for a number of reasons. Working in health services can be stressful but the organisation of Wunan is well-structured, which makes turning up to work each day and focusing on our clients that much easier. We all work as a team here and I feel appreciated for the training I've done and the skillset I provide, which is something I haven't always experienced. I've been able to utilise my training here and thankfully have autonomy in my work.

For example, since coming to work at Wunan I have gotten a chronic disease program up and running. It's been going for about five months now and we are already seeing the great impact that it's having on our clients' health.

Wunan offers such a wide range of health services as well: we do general checkups but also audiometry, spirometry, ECGs, AVIs, retinal screening, aviation medicals, the list goes on. The range of services we are able to provide has really helped give our clients comprehensive care.

**SC** I joined Wunan more recently and it is my first workplace since becoming an Aboriginal Health Worker, but I've been so impressed with how everyone works together as a team and how committed Wunan is to supporting families.

Something great about working at Wunan was what Wayne mentioned, the autonomy and support. I am learning more and doing more every day, and I have never felt that I'm stuck in a specific program or line of work. There's so many doors open and it's just about finding your passion – everyone around here is supportive.

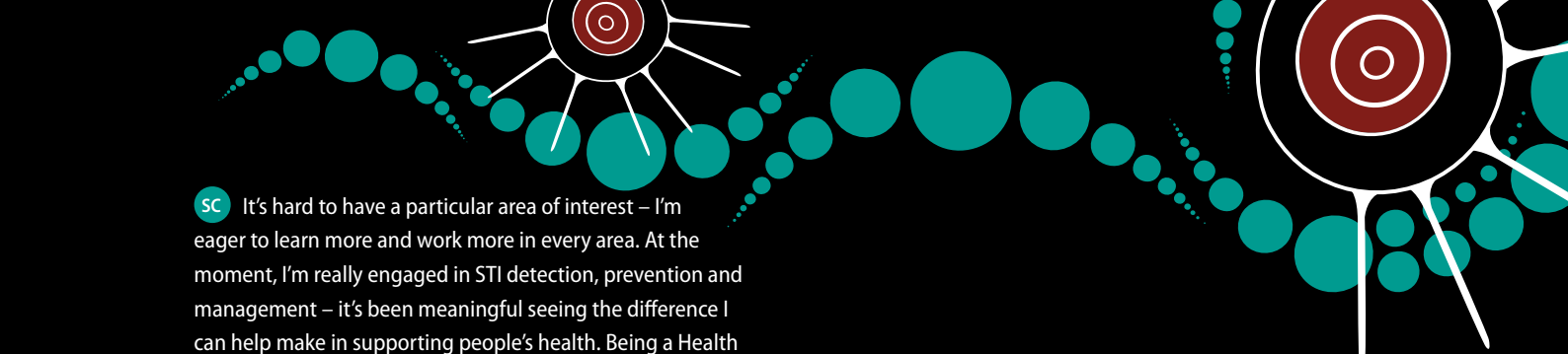
## Why are Aboriginal Health Workers and Practitioners important staff in a clinic team?

**WB** Aboriginal Health Workers and Practitioners are so important. We have been trained to and do carry out holistic primary health care. A doctor's practice scope trains them to identify a problem, treat it as quickly as possible and get their client back out the door. Aboriginal Health Workers and Health Practitioners try to get a bigger picture, we treat what's happening at present but also carry out thorough checkups, top to bottom, to see what might become a problem in the future and to get a full picture of our clients. We make sure to assess mental health, family health, as well as what they come in for.

**SC** It's who we are as people as well. We have local knowledge and work to have a connection with everyone who comes in - if there isn't one already. Many people who come in know my family, and it's things like that which helps them feel more comfortable and able to talk freely. When we have these connections, it reassures them that we are there to help them, and that we respect them. And that is how we keep people coming back to get the care that's needed.

## Do you have any specialisations or particular areas of interest?

**WB** Chronic Care Management and diabetes management is important to me. The detection and maintenance of it, but also all of the other issues that come along with dealing with chronic issues. So many people have complications, mental health issues and times of depression. We've got clients who have lost family members to diabetes, who fall into a depression when they find out their HBA1C is high and we clients that have other complications and health issues that arise from having diabetes. That side of their health is just as important as the chronic disease.



**SC** It's hard to have a particular area of interest – I'm eager to learn more and work more in every area. At the moment, I'm really engaged in STI detection, prevention and management – it's been meaningful seeing the difference I can help make in supporting people's health. Being a Health Worker is such a varied line of work so we will have to see what else comes along my path.

**Can you think of any examples or stories of times when you were able to help someone in a way that the nurses or doctor might not have been able to?**

**SC** Earlier this year actually, we had a NAIDOC day stall, and I was doing on the spot sugar level and blood pressure checks. At one point we had a man and his friends came by for a chat and I did their checks. The tests showed that the man had incredibly high blood sugar – he was quite shocked. I was able to explain what it meant, and that he needed to come in to see the doctor. We booked him in at the clinic on the same day. He's on a plan now and doing well.

But it's occasions like that which show the importance of Aboriginal Health Workers, Health Practitioners and Aboriginal people in health care roles. I kept thinking about how if it wasn't mob doing the checks, then they wouldn't have felt comfortable coming to the stall. He, and others might not have gotten a check-up until something worse had happened. It sounds simple but having accessible health care where mob feel safe coming in, it is really important, and I think non-Aboriginal nurses and doctors don't always provide that space.

**WB** Across the years, I think the trust that I, and other Aboriginal Health Workers and Health Practitioners have been able to build with clients has been so important, and is something that non-Aboriginal people, nurses and doctors fall short on. It's really a knowledge of culture, a knowledge of how to talk. If you don't talk properly and respectfully then you're going to lose them from the start. We have unfortunately seen registered nurses coming into clinics, speaking in Aboriginal Pidgin English and mimicking accents, before clients even get a chance to talk. It's certainly insulting, and it eliminates the respect clients expect to have and should have in health care. It also shows how important it is to have cultural understanding and experience at the forefront of care.

I think as well, there's often a lot of shame created for clients through the ways some doctors and nurses do things. Their language and attitudes, but also the necessity to talk behind closed doors. Health and wellbeing are family orientated, and when people feel like their family is being shut out by being asked to talk only in private, they start to wonder why. Something that grounds my work as an Aboriginal Health Practitioner is trying to make sure the process and our interactions are as positive and respectful for them as they can be.

**What are your aspirations for the future?**

**WB** While it's up and running, the work on my Chronic Disease Management program isn't finished yet, there's so many things I'd like to implement and am still chipping away at. Currently, I'm working on obtaining a new machine for our clinic, the DCA Advantage. It's able to give results for HBA1C and ACR (which helps identify for diabetes and kidney disease respectively) within five minutes. This would help provide solutions for our patients much faster. Clients currently wait days for results, having to book in with our doctor again. This makes accessing healthcare a lot more difficult, particularly if they're coming from out of town. We have people walking around with high sugars for two weeks before they can come back. With this machine, we would be able to have clients get the checks, get the results and make a treatment plan all within one visit. We're working hard to make things easier on our clients and give them treatment in a timely manner.

**SC** Something that I'd like to do is to set up remote clinic runs to Wyndham. A lot of non-local doctors come in and are constantly changing which means this community doesn't have that maintained and reliable care. Clinic runs are provided to a few other communities, and it would be great for local Aboriginal and/or Torres Strait Islander Workers and Health Practitioners to go regularly and help out where they can.

**Is there anyone who was influential in your journey to working in Aboriginal and Torres Strait Islander Health?**

**WB** Dr. Stephanie Trust, without a doubt. She is a Gidja and Walmajarri woman. She's been working for such a long time and has done so much for the health of our community. She's someone for everyone to look up to. Also, the CEO of Halls Creek Aboriginal Medical Service, Yura Yungi has been a great support too. I worked at Yura Yungi in men's health and before that I was a hospital orderly. Before that, I was working for the road and at the meat works, and so to have role models that have come from all walks of life has been comforting.

**SC** I would definitely agree, Dr Steph has been someone that I look up to. Prior to studying and being a Health Worker, I was doing a completely different line of work, I had been working on stations for years, as a machine operator amongst other things. Seeing Steph's progression shows what's possible and achievable. She was working as a nurse in Derby, then an Aboriginal Health worker for over 10 years, and now she's a doctor at Wunan. It's great to see people from our community working and studying elsewhere and then coming back to support others. It's all for the well-being of our people.

## SECTION 5

# Governance and Operations

The NAATSIHWP Board ensures that the work of our organisation is guided by the needs of our Workforce and Aboriginal and Torres Strait Islander people. Each Board member has significant experience as an Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner and each brings a different jurisdictional perspective to the decision-making table.

## NAATSIHWP Board



**David Follent**  
*Chairperson*  
New South Wales



**Judith Parnham**  
*Deputy Chair*  
Queensland



**Suzanne Smith**  
*Secretary*  
Tasmania



**Antoinette Liddell**  
*Treasurer*  
South Australia



**Richelle Jackson**  
*Director*  
Victoria



**Yancy Laifoo**  
*Director*  
Torres Strait Island/Northern Peninsula



**Raeylene McKenna**  
*Director*  
Western Australia



## Board update

The NAATSIHWP Board is dedicated to securing our role as a national lead organisation and progressing the Aboriginal and/or Torres Strait Islander Health Practitioner and Health Worker professions. To maximise their efficacy, they have undertaken annual governance and finance training for the past seven years. This has led to prudent decision making, sound financial stewardship and strategic leadership. The organisation is continuing to move from strength as evidenced in this report.

Over the year we farewelled our long serving Treasurer and Victorian representative Christine Ingram and Secretary Natalie Pangquee from the Northern Territory. Both members made significant contributions and leave behind a legacy that has greatly benefited the organisation. We extend our gratitude for their service. In light of these changes, South Australian member Antoinette Liddel has assumed the role of Treasurer and Suzie Smith from Tasmania is now our Secretary.

Richelle Jackson was welcomed to the Board as the Victorian representative. Richelle is a proud Gunditjmara Wiradjuri women with Family ties to Wamba Wamba, Yorta Yorta, Gunni Kunni and some communities in the Northern Territory. Her expertise and fresh perspectives are valuable assets as the organisation navigates new horizons. At the time of writing the Northern Territory position remains unfilled.

## International certification

In July 2022 NAATSIHWP was successful in gaining ISO9001 certification (internationally recognised standards for quality management systems). This further demonstrates the organisation's commitment to continuous improvement and quality management practices. Achieving ISO9001 involved implementing a robust quality management system, undertaking regular audits, and continuously improving our processes. The certification serves as a tangible demonstration to partners stakeholders and clients that NAATSIHWP is dedicated to delivering high quality products and services.

## NAATSIHWP consultancy

As a means of gaining greater autonomy and self-reliance we established NAATSIHWP Consulting and are now actively engaged with a number of organisations. The transition into a consultancy marks a strategic evolution for the organisation. Through this new role NAATSIHWP is positioned to leverage its specialised expertise, knowledge, and industry insights to offer targeted advisory services to those wishing to grow and embed the workforce nationally. The organisation can now engage in a broader spectrum of projects and collaborate with a diverse range of stakeholders to address the challenges facing the Aboriginal and Torres Strait Islander Health Worker and Health Practitioner professions.

As a charity and not for profit organisation, any profit generated through consultancies is reinvested to support and strengthen the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce.

If you are seeking to better understand the roles, skills, and training of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, improve workforce recruitment and retention, improve career pathways or implement Aboriginal and/or Torres Strait Islander led models of care please don't hesitate to contact us.



# The Future

As we look ahead, we know that the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce is a deep source of pride for Aboriginal and Torres Strait Islander people. Borne from the need for culturally safe, responsive, and high-quality health care the professions were established by Aboriginal and Torres Strait Islander people for Aboriginal and Torres Strait Islander people close to century ago.

NAATSHWP is committed to honouring this past and the legacy of those early leaders. Our ongoing growth and transition will be underpinned by a strategic commitment to advancing the rights and autonomy of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce and those of our Peoples more broadly. Everything we do is deeply grounded in a rights-based approach, and in navigating the future, we will continue to facilitate a paradigm shift by actively engaging in practices that respect and promote the rights of Aboriginal and Torres Strait Islander people to determine their health outcomes.

We will do this by promoting a culture of continuous learning and professional development that aligns with Indigenous ways of knowing being and doing and upholds the rights of the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce and the principles of informed decision-making and community control. By incorporating a rights-based lens, NAATSHWP contributes to the broader movement of embedding rights in health and fostering genuine partnerships that respect autonomy.

Our goal is to ensure that the health system meets the needs of Aboriginal and Torres Strait Islander people, and the critical contribution of our workforce is recognised and valued nationally. A key focus over the next three years will be working to deliver greater national consistency and embedding a professional identity for the workforce.



National Association of Aboriginal and Torres Strait  
Islander Health Workers and Practitioners

ABN 61 138 748 697

# Financial Statements 2022–23

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**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**DIRECTORS' REPORT**

Your directors present their report on the company for the financial year ended 30 June 2023

**DIRECTORS**

The names of the directors in office at any time during or since the end of the financial year are:

David Follent (Chair)

Judith Parnham (Deputy Chair)

Christine Ingram (Treasurer)                      retired 11 November 2022

Antoinette Liddell (Treasurer)                      commenced 11 November 2022

Yancy Laifoo

Richelle Jackson                                      commenced 11 November 2022

Raeylene McKenna                                      re-elected 11 November 2022

Suzanne Smith    re-elected 11 November 2022

Natalie Pangquee                                      resigned 3 February 2023

Harold Koops    casual commencement 13 March 2023

Directors have been in office since the start of the financial year to the date of this report unless otherwise stated.

**OBJECTIVES**

**Objective 1:** To increase the appropriate use of the full range of skills and integration of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners into health services across all sectors in the health system

**Objective 2:** To improve the accessibility and quality of professional support and professional development opportunities for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners

**Objective 3:** To increase our influence in the development and implementation of Aboriginal and Torres Strait Islander health policies and programs relevant to the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce.

**Objective 4:** To increase our influence in the development and implementation of recruitment and retention strategies for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners.

**IMPACT INDICATORS FOR THE OBJECTIVES**

**Objective1:**

Stakeholders from all sectors of the health system report high interest in and improved ability to develop a scope of practice for best utilisation of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners.

Stakeholders from all sectors of the health system report both knowledge and use of the good practice models on the effective utilisation of and expanded career pathways for Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners.



**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**DIRECTORS' REPORT (CONTINUED)**

**Objective 2:**

Members report that National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners Limited ('NAATSIHWP')s professional information and support, including the online portal, professional networking forums, conferences and symposiums:

- are relevant to their professional needs and expectations
- are of high quality
- are offered in accessible formats and/or locations.

Members report that NAATSIHWP's information about professional development opportunities:

- is relevant to their professional needs and expectations
- offers them valuable options for skill development and new career pathways.

**Objective 3:**

Members report that NAATSIHWP's professional information and support, including the online Portal, NAATSIHWP advice and position statements are reflected in national and jurisdictional policy development and decision-making processes that impact on the Aboriginal and/or Torres Strait Islander Health Worker and Health Practitioner workforce and Aboriginal and Torres Strait Islander health services.

**Objective 4:**

Stakeholders from the vocational education and training (VET) sector and all sectors of the health system identify NAATSIHWP as a respected source of information and expertise on recruiting and retaining A&TSHWs and A&TSHIPs.

Stakeholders from the VET sector and all sectors of the health system report they have acted on NAATSIHWP's advice and/ or implemented the learning gained from their participation in NAATSIHWP initiatives on recruitment and retention.

**Principal Activity**

The principal activity of the company during the financial year was to improve recruitment and retention of the workforce, scope and effective deployment of Aboriginal and/or Torres Strait Islander Health Workers and Health Practitioners, as a vital and valued component of a strong professional Aboriginal and Torres Strait Islander health workforce needed to close the gap in health outcomes for Aboriginal and Torres Strait Islander Australians.

With business returning to normal after the COVID-19 pandemic the company is now delivering a combination of virtual and face to face activities. This has had no impact on revenue.

Effective 1 July 2020 the company was endorsed as a Health Promotion Charity with the following tax concessions: GST Concession, Income Tax Exemption and FBT Exemption. The Company has Deductible Gift (DGR) Recipient Status. As a consequence, the financial statements now must be prepared as required by the [ACNC Act and ACNC Regulations](#) and in accordance with the [Australian Accounting Standards](#) set by the Australian Accounting Standards Board (AASB)

On 22 October 2020, The Company changed its name from "National Aboriginal and Torres Strait Islander Health Workers Association" to "National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners Ltd".

NAATSIHWP is a party to a one year funding agreement with the Department of Health for the period 1 July 2022 to 30 June 2023. Under this agreement, NAATSIHWP has received funding of \$2,347,400 (excl GST) to 30 June 2023. Grant expenditure was \$2,374,343 to 30 June 2023.



**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**DIRECTORS' REPORT (CONTINUED)**

**MEETINGS OF DIRECTORS**

<b>DIRECTORS</b>	<b>DIRECTORS' MEETINGS</b>	
	<b>Number eligible to attend</b>	<b>Number attended</b>
David Follent (Chair)	4	4
Judith Parnham (Deputy Chair)	4	4
Christine Ingram (Treasurer until 11 November 2022)	2	2
Antoinette Liddell (Treasurer commenced 11 November 2022)	4	4
Yancy Laifoo	4	2
Richelle Jackson (commenced 11 November 2022)	2	2
Raeylene McKenna (re-elected 11 November 2022)	4	3
Suzanne Smith (re-elected 11 November 2022)	4	4
Natalie Pangquee (until 3 February 2023)	2	2
Harold Koops (casual commenced 13 March 2023)	2	2

**CONTRIBUTIONS ON WIND UP**

The company is incorporated under the Corporations Act 2001 and is a company limited by guarantee. If the company is wound up, subject to provisions in the constitution each member maybe required to make a maximum contribution of \$10.00 towards meeting any outstanding obligations. At 30 June 2023, the total maximum amount that members of the company maybe liable to contribute if the company is wound up is \$11,690 (2022: \$10,830).


The maximum amount that members of the company are liable to contribute if the company is wound up is now calculated for Full Members only.




**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**DIRECTORS' REPORT (CONTINUED)**

A copy of the auditor's independence declaration as required under the *Australian Charities and Not-for-profits Commission Act 2012* is set out on page 8.

David Follent   
Chair ..... Dated this 29 day of July 2023

Antoinette Liddell   
Treasurer ..... Dated this 29 day of July 2023


**RSM Australia Partners**

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T +61 (0) 2 6217 0300  
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**INDEPENDENT AUDITOR'S REPORT**

To the Members of National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners Limited

**Opinion**

We have audited the financial report of National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners Limited (the Company), which comprises the statement of financial position as at 30 June 2023, the statement of comprehensive income, the statement of changes in equity and the statement of cash flows for the year then ended, and notes to the financial statements, including a summary of significant accounting policies, and the directors' declaration.

In our opinion, the accompanying financial report of the Company has been prepared in accordance with Division 60 of the *Australian Charities and Not-for-profits Commission Act 2012*, including:

- (i) giving a true and fair view of the Company's financial position as at 30 June 2023 and of its financial performance and cash flows for the year ended on that date; and
- (ii) complying with Australian Accounting Standards – Simplified Disclosures and Interpretations issued by the Australian Accounting Standards Board ('AASB') and the *Australian Charities and Not-for-profits Commission Regulation 2013*.

**Basis for Opinion**

We conducted our audit in accordance with Australian Auditing Standards. Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Report* section of our report. We are independent of the Company in accordance with the ethical requirements of the Accounting Professional and Ethical Standards Board's APES 110 *Code of Ethics for Professional Accountants* (the Code) that are relevant to our audit of the financial report in Australia. We have also fulfilled our other ethical responsibilities in accordance with the Code.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

**Other Information**

The directors are responsible for the other information. The other information comprises the information included in the Company's annual report for the year ended 30 June 2023, but does not include the financial report and the auditor's report thereon.

Our opinion on the financial report does not cover the other information and accordingly we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial report, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial report or our knowledge obtained in the audit or otherwise appears to be materially misstated.

**THE POWER OF BEING UNDERSTOOD**
**AUDIT | TAX | CONSULTING**

RSM Australia Partners is a member of the RSM network and trades as RSM. RSM is the trading name used by the members of the RSM network. Each member of the RSM network is an independent accounting and consulting firm which practices in its own right. The RSM network is not itself a separate legal entity in any jurisdiction.

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If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact. We have nothing to report in this regard.

#### **Responsibilities of the Directors for the Financial Report**

The directors of the Company are responsible for the preparation of the financial report that gives a true and fair view in accordance with Australian Accounting Standards – Simplified Disclosures and the Australian Charities and Not-for-profits Commission Act 2012 and for such internal control as the directors determine is necessary to enable the preparation of the financial report that gives a true and fair view and is free from material misstatement, whether due to fraud or error.

In preparing the financial report, the directors are responsible for assessing the ability of the Company to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the Company or to cease operations, or have no realistic alternative but to do so.

#### **Auditor's Responsibilities for the Audit of the Financial Report**

Our objectives are to obtain reasonable assurance about whether the financial report as a whole is free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the Australian Auditing Standards will always detect a material misstatement when it exists. Misstatements can arise from fraud or error and are considered material if, individually or in the aggregate, they could reasonably be expected to influence the economic decisions of users taken on the basis of this financial report.

A further description of our responsibilities for the audit of the financial report is located at the Auditing and Assurance Standards Board website at: [http://www.auasb.gov.au/auditors\\_responsibilities/ar4.pdf](http://www.auasb.gov.au/auditors_responsibilities/ar4.pdf). This description forms part of our auditor's report.

RSM

**RSM AUSTRALIA PARTNERS**

*G Stenhouse*

**GED STENHOUSE**  
Partner

Canberra, Australian Capital Territory  
Dated: 1 August 2023





**RSM Australia Partners**

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**AUDITOR'S INDEPENDENCE DECLARATION**

As lead auditor for the audit of the financial report of National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners Limited for the year ended 30 June 2023, I declare that, to the best of my knowledge and belief, there have been no contraventions of:

- (i) the auditor independence requirements of the *Australian Charities and Not-for-profit Act 2012* in relation to the audit; and
- (ii) any applicable code of professional conduct in relation to the audit.

RSM

**RSM AUSTRALIA PARTNERS**

G Stenhouse

Canberra, Australian Capital Territory  
Dated: 1 August 2023

**GED STENHOUSE**  
Partner

**THE POWER OF BEING UNDERSTOOD**  
**AUDIT | TAX | CONSULTING**

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**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**


**DIRECTORS DECLARATION**

In the director's opinion:

1. the attached financial statements and notes comply with the Australian Accounting Standards - Simplified Disclosures and Interpretations issued by the Australian Accounting Standard Board ('AASB') and the *Australian Charities and Not for Profits Commission Act 2012*;
2. the attached financial statements and notes give a true and fair view of the company's financial position as at 30 June 2023 and of its performance for the financial year ended on that date; and
3. there are reasonable grounds to believe that the company will be able to pay its debts as and when they become due and payable.


On behalf of the directors

This declaration is made in accordance with a resolution of the Directors.

Chair:  .....

David Follent

Dated this.....29.....day of..... July ..... 2023

Treasurer:  .....

Antoinette Liddell

Dated this.....29.....day of..... July ..... 2023

**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**STATEMENT OF COMPREHENSIVE INCOME  
FOR THE YEAR ENDED 30 JUNE 2023**

	Note	2023 \$	2022 \$
<b>Revenue</b>			
Grant funding	2	2,347,400	1,940,204
<i>Other Income</i>			
Interest	2	6,251	836
Sundry income	2	713,222	156,785
Merchandise	2	21,075	2,909
<b>Total Revenue</b>		<b><u>3,087,948</u></b>	<b><u>2,100,734</u></b>
<b>Expenses</b>			
Administration	3	(363,569)	(337,652)
Employee expenses	3	(1,555,116)	(1,401,811)
Governance	3	(263,740)	(113,227)
Members Support	3	(709,631)	(228,956)
<b>Total Expenses</b>		<b><u>(2,892,056)</u></b>	<b><u>(2,081,646)</u></b>
<b>CURRENT YEAR SURPLUS</b>		<b><u>195,892</u></b>	<b><u>19,088</u></b>
<b>OTHER COMPREHENSIVE INCOME</b>		<b><u>-</u></b>	<b><u>-</u></b>
<b>TOTAL COMPREHENSIVE INCOME</b>		<b><u>195,892</u></b>	<b><u>19,088</u></b>

The accompanying notes form part of this financial report.



**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**STATEMENT OF FINANCIAL POSITION  
AS AT 30 JUNE 2023**

	Note	2023 \$	2022 \$
<b>CURRENT ASSETS</b>			
Cash and cash equivalents	12a	1,508,941	883,943
Trade and other receivables	4	27,155	46,466
Prepayments		68,531	155,928
Inventories	5	16,486	31,491
<b>TOTAL CURRENT ASSETS</b>		<b>1,621,113</b>	<b>1,117,828</b>
<b>NON-CURRENT ASSETS</b>			
Property, plant and equipment	6	104,303	66,643
Right of use assets	7	229,163	22,912
<b>TOTAL NON-CURRENT ASSETS</b>		<b>333,466</b>	<b>89,555</b>
<b>TOTAL ASSETS</b>		<b>1,954,579</b>	<b>1,207,383</b>
<b>CURRENT LIABILITIES</b>			
Trade and other payables	8	232,542	102,108
Lease liabilities	9	162,042	5,520
Deferred revenue	11	390,424	222,144
Provisions	10	190,631	161,320
<b>TOTAL CURRENT LIABILITIES</b>		<b>975,639</b>	<b>491,092</b>
<b>NON-CURRENT LIABILITIES</b>			
Lease liabilities	9	54,323	10,844
Provisions	10	69,234	45,956
<b>TOTAL NON-CURRENT LIABILITIES</b>		<b>123,557</b>	<b>56,800</b>
<b>TOTAL LIABILITIES</b>		<b>1,099,196</b>	<b>547,892</b>
<b>NET ASSETS</b>		<b>855,383</b>	<b>659,491</b>
<b>EQUITY</b>			
Retained earnings		659,491	640,403
Current year earnings		195,892	19,088
<b>TOTAL EQUITY</b>		<b>855,383</b>	<b>659,491</b>

The accompanying notes form part of this financial report.



**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**STATEMENT OF CHANGES IN EQUITY  
FOR THE YEAR ENDED 30 JUNE 2023**

	Retained Earnings	Total
	\$	\$
<b>Balance at 1 July 2021</b>	<b>640,403</b>	<b>640,403</b>
Surplus from operations	19,088	19,088
<b>Balance at 30 June 2022</b>	<b>659,491</b>	<b>659,491</b>
Surplus from operations	195,892	195,892
<b>Balance at 30 June 2023</b>	<b>855,383</b>	<b>855,383</b>

The accompanying notes form part of this financial report.



**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED**  
ABN 61 138 748 697

**STATEMENT OF CASH FLOWS  
FOR THE YEAR ENDED 30 JUNE 2023**

	Note	2023 \$	2022 \$
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>			
Government grants received		2,769,731	2,353,897
Sale of merchandise		23,183	3,200
Sundry receipts		784,544	172,464
Interest received		6,251	836
Payments to suppliers and employees		(2,782,873)	(2,201,408)
Interest paid		(15,349)	(3,020)
<b>Net cash provided by operating activities</b>	12b	<u><b>785,487</b></u>	<u><b>325,969</b></u>
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>			
Fixed asset purchases		(94,955)	-
<b>Net cash used in investing activities</b>		<u><b>(94,955)</b></u>	<u><b>-</b></u>
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>			
Lease repayments		(65,534)	(64,459)
<b>Net cash used in financing activities</b>		<u><b>(65,534)</b></u>	<u><b>(64,459)</b></u>
Net increase in cash held		624,998	261,510
Cash at beginning of year		883,943	622,433
<b>Cash at end of year</b>	12a	<u><b>1,508,941</b></u>	<u><b>883,943</b></u>

The accompanying notes form part of this financial report.

**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2023**

**NOTE 1: SIGNIFICANT ACCOUNTING POLICIES**

The principal accounting policies adopted in the preparation of the financial statements are set out below. These policies have been consistently applied to all the years presented, unless otherwise stated.

**New or amended Accounting Standards and Interpretations adopted**

National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners Limited ('NAATSIHWP' or 'the company') has adopted all of the new or amended Accounting Standards and Interpretations issued by the Australian Accounting Standards Board ('AASB') that are mandatory for the current reporting period.

Any new or amended Accounting Standards or Interpretations that are not yet mandatory have not been early adopted.

**Basis of preparation**

These general purpose financial statements have been prepared in accordance with the Australian Accounting Standards - Simplified Disclosures issued by the Australian Accounting Standards Board ('AASB'), the Australian Charities and Not-for-profits Commission Act 2012 and associated regulations, as appropriate for not-for-profit oriented entities.

*Historical cost convention*

The financial statements have been prepared under the historical cost convention.

**Revenue Recognition**

*Grant revenue*

Grant funding that contains specific conditions and enforceable obligations on the use of those funds are recognised per AASB 15, such that income is recognised as and when the Company satisfies its performance obligations stated within the funding agreements. For such grants it is the policy of the Company to treat grant monies as contract liabilities in the statement of financial position where the Company is contractually obliged to provide the services in a subsequent financial period to when the grant is received or in the case of specific project grants where the project has not been completed. General grants that do not impose specific performance obligations on the Company are recognised as per AASB 1058 where income is recognised when the Company obtains control of those funds, which is usually on receipt.

*Interest*

Interest revenue is recognised as interest accrues using the effective interest method.

*Other revenue*

Other revenue is recognised when it is received or when the right to receive payment is established.

**Income Tax**

As the company is a charitable institution in terms of subsection 50-5 of the Income Tax Assessment Act 1997, as amended, it is exempt from paying income tax.

**Current and non-current classification**

Assets and liabilities are presented in the statement of financial position based on current and non-current classification.

An asset is classified as current when: it is either expected to be realised or intended to be sold or consumed in the company's normal operating cycle; it is held primarily for the purpose of trading; it is expected to be realised within 12 months after the reporting period; or the asset is cash or cash equivalent unless restricted from being exchanged or used to settle a liability for at least 12 months after the reporting period. All other assets are classified as non-current.



**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2023**

**NOTE 1: SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)**

**Current and non-current classification (continued)**

A liability is classified as current when: it is either expected to be settled in the company's normal operating cycle; it is held primarily for the purpose of trading; it is due to be settled within 12 months after the reporting period; or there is no unconditional right to defer the settlement of the liability for at least 12 months after the reporting period. All other liabilities are classified as non-current.

Deferred tax assets and liabilities are always classified as non-current.

**Property, Plant and Equipment**

Each class of property, plant and equipment is carried at cost or fair value less, where applicable, any accumulated depreciation and impairment losses.

*Plant and Equipment*

Plant and equipment is measured on the cost basis and is therefore carried at cost less accumulated depreciation and any accumulated impairment losses. In the event the carrying amount of plant and equipment is greater than its estimated recoverable amount, the carrying amount is written down immediately to its estimated recoverable amount.

Subsequent costs are included in the asset's carrying amount or recognised as a separate asset, as appropriate, only when it is probable that future economic benefits associated with the item will flow to the company and the cost of the item can be measured reliably. All other repairs and maintenance are recognised in profit or loss during the financial period in which they are incurred.

*Depreciation*

Depreciation of computer equipment assets is calculated on a diminishing value basis over the asset's useful life. Depreciation of other fixed assets is calculated on a straight-line basis to write off the net cost of each asset. The depreciation rates used for each class of depreciable asset are:

<b><i>Class of plant and equipment</i></b>	<b><i>Depreciation Rate</i></b>
Fixtures & Fittings	10-25%
Office Equipment	10-25%
Computer Equipment	33-50%

The assets' residual values and useful lives are reviewed and adjusted, if appropriate, at the end of each reporting period.

An item of property, plant and equipment is derecognised upon disposal or when there is no future economic benefit to the company. Gains and losses between the carrying amount and the disposal proceeds are taken to profit or loss.

**Impairment of non-financial assets**

At the end of each reporting period, the company assesses whether there is any indication that an asset may be impaired. The assessment will consider both external and internal sources of information. If such an indication exists, an impairment test is carried out on the asset by comparing the recoverable amount of that asset, being the higher of the asset's fair value less costs to sell and its value-in-use, to the asset's carrying amount. Any excess of the asset's carrying amount over its recoverable amount is immediately recognised in profit or loss.



**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2023**

**NOTE 1: SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)**

**Cash and Cash Equivalents**

Cash and cash equivalents includes cash on hand, deposits held at call with financial institutions, other short-term, highly liquid investments with original maturities of three months or less that are readily convertible to known amounts of cash and which are subject to an insignificant risk of changes in value.

**Trade and other receivables**

Trade and other receivables are recognised at amortised cost, less any allowance for expected credit losses. Trade receivables are generally due for settlement within 30 days.

The company has applied the simplified approach to measuring expected credit losses, which uses a lifetime expected loss allowance. To measure the expected credit losses, trade receivables have been grouped based on days overdue.

**Inventories**

Inventory is stated at the lower of cost and net realisable value.

Stock in transit is stated at the lower of cost and net realisable value. Cost comprises of purchase and delivery costs, net of rebates and discounts received or receivable.

Net realisable value is the estimated selling price in the ordinary course of business the estimated costs necessary to make the sale.

**Trade and other payables**

These amounts represent liabilities for goods and services provided to the company prior to the end of the financial year and which are unpaid. Due to their short-term nature they are measured at amortised cost and are not discounted. The amounts are unsecured and are usually paid within 30 days of recognition.

**Employee Benefits**

*Short-term employee benefits*

Liabilities for wages and salaries, including non-monetary benefits, annual leave and long service leave expected to be settled wholly within 12 months of the reporting date are measured at the amounts expected to be paid when the liabilities are settled.

*Other long-term employee benefits*

The liability for long service leave not expected to be settled within 12 months of the reporting date are measured at the present value of expected future payments to be made in respect of services provided by employees up to the reporting date using the projected unit credit method. Consideration is given to expected future wage and salary levels, experience of employee departures and periods of service. Expected future payments are discounted using market yields at the reporting date on corporate bonds with terms to maturity and currency that match, as closely as possible, the estimated future cash outflows.

*Defined contribution superannuation expense*

Contributions to defined contribution superannuation plans are expensed in the period in which they are incurred.

**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2023**

**NOTE 1: SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)**

**Goods and Services Tax (GST) and other similar taxes**

Revenues, expenses and assets are recognised net of the amount of associated GST, unless the GST incurred is not recoverable from the tax authority. In this case it is recognised as part of the cost of the acquisition of the asset or as part of the expense.

Receivables and payables are stated inclusive of the amount of GST receivable or payable. The net amount of GST recoverable from, or payable to, the tax authority is included in other receivables or other payables in the statement of financial position.

Cash flows are presented on a gross basis. The GST components of cash flows arising from investing or financing activities which are recoverable from, or payable to the tax authority, are presented as operating cash flows.

Commitments and contingencies are disclosed net of the amount of GST recoverable from, or payable to, the tax authority.

	2023 \$	2022 \$
<b>NOTE 2: REVENUE</b>		
Operating activities		
DoH funding	2,347,400	1,940,204
<b>Total operating activities</b>	<b>2,347,400</b>	<b>1,940,204</b>
Interest received	6,251	836
Sundry income	713,222	156,785
Merchandise income	21,075	2,909
<b>Total revenue</b>	<b>3,087,948</b>	<b>2,100,734</b>

**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2023**

	<b>2023</b>	<b>2022</b>
	<b>\$</b>	<b>\$</b>
<b>NOTE 3: PROFIT FROM OPERATIONS</b>		
Profit from ordinary activities before income tax expenses has been determined after:		
Expenses:		
Administration and related		
- Merchandise related	45,544	43,951
- Depreciation and amortisation of property, plant and equipment	116,579	128,985
- Accommodation and office (including IT and Training)	196,626	169,719
- Leasing related expenses	4,820	(5,003)
	<u>363,569</u>	<u>337,652</u>
Employee benefits		
- Administration	366,534	207,778
- Program	1,188,582	1,194,033
	<u>1,555,116</u>	<u>1,401,811</u>
Governance and related		
- Training	23,763	8,103
- Board meeting travel	182,112	51,048
- Insurance	19,220	14,011
- Legal	8,402	9,968
- Audit	21,182	14,836
- Others	9,061	15,261
	<u>263,740</u>	<u>113,227</u>
Member support and related (including cost of forums representation and support of members)		
- General program	318,191	80,827
- Marketing	62,166	53,292
- Consulting	43,587	52,516
- Travel related	285,687	42,321
	<u>709,631</u>	<u>228,956</u>
<b>Total expenses</b>	<u><b>2,892,056</b></u>	<u><b>2,081,646</b></u>

**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2023**

	2023 \$	2022 \$
<b>NOTE 4: TRADE AND OTHER RECEIVABLES</b>		
Trade debtors	11,312	26,976
GST receivable	-	3,686
Cab charge bond	200	200
Rental bond	15,643	15,604
	<u>27,155</u>	<u>46,466</u>

**NOTE 5: INVENTORIES**

Merchandises	16,486	31,491
	<u>16,486</u>	<u>31,491</u>

**NOTE 6: PROPERTY, PLANT AND EQUIPMENT**

Fixtures and fittings – at cost	71,189	65,734
Less accumulated depreciation	(64,166)	(56,250)
	<u>7,023</u>	<u>9,484</u>
Computer equipment – at cost	208,792	119,292
Less accumulated depreciation	(114,155)	(69,924)
	<u>94,637</u>	<u>49,368</u>
Office equipment – at cost	26,890	26,890
Less accumulated depreciation	(24,247)	(19,099)
	<u>2,643</u>	<u>7,791</u>
	<u>104,303</u>	<u>66,643</u>

*Movements in carrying amounts*

Movement in the carrying amounts for each class of property, plant and equipment between the beginning and the end of the current financial year.

	Fixtures and Fittings \$	Office Equipment \$	Computer Equipment \$	Total \$
<b>Balance at 1 July 2021</b>	<b>25,595</b>	<b>14,122</b>	<b>90,292</b>	<b>130,009</b>
Depreciation expense	(16,111)	(6,331)	(40,924)	(63,366)
<b>Balance at 30 June 2022</b>	<b>9,484</b>	<b>7,791</b>	<b>49,368</b>	<b>66,643</b>
Additions	5,455	-	89,500	94,955
Depreciation expense	(7,916)	(5,148)	(44,231)	(57,295)
<b>Balance at 30 June 2023</b>	<b>7,023</b>	<b>2,643</b>	<b>94,637</b>	<b>104,303</b>



**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2023**

	2023 \$	2022 \$
<b>NOTE 7: RIGHT OF USE ASSETS</b>		
Right of use assets – at cost	314,056	48,520
Less accumulated amortisation	<u>(84,893)</u>	<u>(25,608)</u>
	<b><u>229,163</u></b>	<b><u>22,912</u></b>
<b>Balance at 1 July 2022</b>		<b>\$ 22,912</b>
Additions		265,536
Amortisation expense		<u>(59,285)</u>
<b>Balance at 30 June 2023</b>		<b><u>229,163</u></b>

**NOTE 8: TRADE AND OTHER PAYABLES**

Trade creditors	17,059	22,681
Accruals	10,313	8,688
Other payables	<u>205,170</u>	<u>70,739</u>
	<b><u>232,542</u></b>	<b><u>102,108</u></b>

**NOTE 9: LEASE LIABILITIES**

Current	162,042	5,520
Non-current	<u>54,323</u>	<u>10,844</u>
	<b><u>216,365</u></b>	<b><u>16,364</u></b>

Lease liabilities relate to the lease of office space, office equipment and a motor vehicle.

	2023 \$	2022 \$
<b>NOTE 10: PROVISIONS</b>		
<i>Employee benefits</i>		
Annual Leave (current)	171,647	141,320
Long Service Leave (non-current)	<u>69,234</u>	<u>45,956</u>
	<b><u>240,881</u></b>	<b><u>187,276</u></b>
<i>Lease</i>		
Make-good	<u>18,984</u>	<u>20,000</u>
<b>Total provisions</b>	<b><u>259,865</u></b>	<b><u>207,276</u></b>

**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2023**

	2023 \$	2022 \$
<b>NOTE 11: DEFERRED REVENUE</b>		
National Symposium	18,182	48,181
Grants received in advance	372,242	173,963
	<u>390,424</u>	<u>222,144</u>
	2023 \$	2022 \$
<b>NOTE 12: CASH FLOW INFORMATION</b>		
a. Reconciliation of cash		
Cash on hand	600	600
Cash at bank	1,508,341	883,343
	<u>1,508,941</u>	<u>883,943</u>
	2023 \$	2022 \$
b. Reconciliation of cash flow from operating activities		
<b>Surplus:</b>	195,892	19,088
<b>Non-cash movements from ordinary activities:</b>		
Depreciation and amortisation	116,579	128,985
Lease modification	-	(10,683)
<b>Changes in assets and liabilities:</b>		
(Increase)/decrease in receivables and prepayments	106,708	(41,462)
(Increase)/decrease in inventories	15,005	(15,601)
Increase/(decrease) in creditors	130,434	4,348
Increase/(decrease) in provisions	52,589	58,695
Increase/(decrease) in deferred revenue	168,280	182,599
<b>Net cash provided by operating activities</b>	<u>785,487</u>	<u>325,969</u>

**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
HEALTH WORKERS AND PRACTITIONERS LIMITED  
ABN 61 138 748 697**

**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2023**

**NOTE 13: RELATED PARTIES TRANSACTIONS AND KEY MANAGEMENT PERSONNEL DISCLOSURES**

Transactions between related parties are on normal commercial terms and conditions no more favourable than those available to other parties unless otherwise stated.

The aggregate compensation made to directors and other members of key management personnel of the company is set out below:

	Salary & Fees \$	Superannuation contributions \$	Total \$
<b>Key Management Personnel Summary</b>			
2023	714,679	71,468	786,147
Total compensation	<b>714,679</b>	<b>71,468</b>	<b>786,147</b>
2022	604,309	57,386	661,695
Total compensation	<b>604,309</b>	<b>57,386</b>	<b>661,695</b>

**NOTE 14: DEPARTMENT OF HEALTH GRANT SPENDING**

	New Funding 2022- 2023 \$	Cumulative 2018-2022 \$	Cumulative 2018-2021 \$	Cumulative 2018-2020 \$	Cumulative 2018-2019 \$
Department of Health grant received	2,347,400	7,682,713	5,742,509	3,802,305	1,887,000
Grant expenditure	2,374,343	7,722,402	5,747,255	4,133,982	2,014,917
(Overspent)	<b>(26,943)</b>	<b>(39,689)</b>	<b>(4,746)</b>	<b>(331,677)</b>	<b>(127,917)</b>

NAATSIHWP was a party to a four year funding agreement with the Department of Health for the period 1 July 2018 to 30 June 2022. Under this agreement, NAATSIHWP had received funding of \$7,682,713 (excl GST) to 30 June 2022. Grant expenditure was \$7,722,402 to 30 June 2022.

NAATSIHWP is a party to a one year funding agreement with the Department of Health for the period 1 July 2022 to 30 June 2023. Under this agreement, NAATSIHWP has received funding of \$2,347,400 (excl GST) to 30 June 2023. Grant expenditure was \$2,374,343 to 30 June 2023.

Included in Grant expenditure are amounts relating to purchased IT equipment in previous financial years but yet to be fully depreciated in this current financial year.

**NOTE 15: CONTINGENT LIABILITIES**

The company had no contingent liabilities as at 30 June 2023 and 30 June 2022.

**NOTE 16: ECONOMIC DEPENDENCE**

Economic dependence exists where the normal trading activities depends upon a significant volume of business. NAATSIHWP is dependent on grants from the Department of Health to carry out its normal activities. It is noted that NAATSIHWP has grant funding up to 30 June 2026 with an agreement executed on 3 July 2023.



**NATIONAL ASSOCIATION OF ABORIGINAL AND TORRES STRAIT ISLANDER  
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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 30 JUNE 2023**

**NOTE 17: COMPANY DETAILS**

The principal place of business of the Company is:  
National Association of Aboriginal and Torres Strait Islander Health Workers and Practitioners  
Ground Floor, 31-37 Townshend Street  
PHILLIP ACT 2606

**NOTE 18: EVENTS OCCURRING AFTER THE REPORTING DATE**

No matter or circumstance has arisen since 30 June 2023 that has significantly affected, or may significantly affect the company's operations, the results of those operations, or the company's state of affairs in future financial years.

**NOTE 19: CONTRIBUTION ON WINDING UP**

The company is incorporated under the Corporations Act 2001 and is a company limited by guarantee. If the company is wound up, subject to provisions in the constitution each member maybe required to make a maximum contribution of \$10.00 towards meeting any outstanding obligations. At 30 June 2023, the total maximum amount that members of the company maybe liable to contribute if the company is wound up is \$11,690 (2022: \$10,830).

The maximum amount that members of the company are liable to contribute if the company is wound up is now calculated for Full Members only.





**NAATSIHWP**  
National Association of Aboriginal and Torres  
Strait Islander Health Workers and Practitioners

**National Association of Aboriginal and Torres Strait  
Islander Health Workers and Practitioners Limited**

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