

NACCHO



National Aboriginal Community
Controlled Health Organisation

STRATEGIC DIRECTIONS 2023–2025





Preamble

NACCHO is the national leadership body for Aboriginal and Torres Strait Islander health in Australia. It provides informed advice and guidance to the nine Australian governments and a range of stakeholders on policy and budget matters that will contribute to the quality of life for Aboriginal and Torres Strait Islander people.

NACCHO represents 145 Aboriginal community-controlled health organisations (ACCHOs). Collectively, we have well over 50 years of experience since the first ACCHO was established in Redfern in 1971. Our members operate over 550 clinics providing comprehensive primary health care to Aboriginal and Torres Strait Islander people across Australia. Our sector provides over 3.1 million episodes of care each year for over 410,000 people. In very remote areas, our services provide about one million episodes of care each year. Few organisations can boast a national service footprint that includes such comprehensive coverage, including so many remote areas.

The Aboriginal and Torres Strait Islander population has a growth rate of 2.0-2.3 per cent per year (almost twice the non-Indigenous population growth rate of 1.3 per cent). Therefore, there is a need to advocate successfully for targeted additional resources to address this growing need and to contribute in closing the health gap. The Australian Institute of Health and Welfare (AIHW) calculates that the burden of disease for Aboriginal and Torres Strait Islanders is 2.3 times higher than that of other Australians. In an [independent report](#) published by Equity Economics in May 2022, the health funding gap is \$4.4b per year, or about \$5,000 per Aboriginal and Torres Strait islander person each year. This debunks the dangerous myth that Aboriginal programs are over-funded. The health funding gap must close if the health gap itself is to close. Each year, NACCHO sets out a way forward with its pre-budget submissions to Treasury.

Our model of community-controlled effective health care was proven in the pandemic. With the higher incidence of comorbidities, we had feared a death rate equivalent to that experienced by other First Nations Peoples around the world, but swift action to protect our communities meant that the impact on our people has been significantly below estimations.



NACCHO's vision

Aboriginal and Torres Strait Islander people enjoy quality of life through whole-of-community self-determination and individual spiritual, cultural, physical, social and emotional wellbeing. Aboriginal health must be in Aboriginal hands.

This Strategic Directions document describes four key strategic priorities that NACCHO will focus on over the next three years (2023-25). Within each strategy, a number of specific elements and deliverables are set out. These strategies and actions recognise Aboriginal and Torres Strait Islander cultural diversity across Australia.



STRATEGIC PRIORITY 1

Further strengthen NACCHO's national influence to increase investment in Aboriginal and Torres Strait Islander comprehensive primary health care

This involves the development of a strong brand and NACCHO growing further as a trusted and well-connected national institution. NACCHO will continue to create a national agenda, be agile in responding to opportunities, and secure necessary funding and stability for the sector well into the future.

Actions

1. Champion and support the expansion of Aboriginal community-controlled health services to meet the health needs of Aboriginal people
2. Continue to secure funding for the sector and to work with governments to begin closing the health funding gap (\$4.4b). This will involve fairer access to our share of existing funding and appropriations, but will also need to include:
 - a. Increased Commonwealth funding for IAHP and funds accessed from the mainstream
 - b. Increased state/territory funding
 - c. Better access to private health insurance
 - d. Increased philanthropic contributions and partnerships opportunities for the sector
3. Develop and maintain effective partnerships with all stakeholders (including MOUs)
4. Renew the NACCHO brand by developing and implementing a strategic communication and marketing plan
5. In collaboration with state and territory peaks, advocate on behalf of communities who are seeking to access community-controlled health programs and help with the transition of more government-run Aboriginal medical services into ACCHOs
6. Build NACCHO into critical national health architecture (e.g., PBAC)

KPIs

- 1 Measures of the reduction of the funding gap, include:
 - a. Increased level of funding and financial security for the sector over the forward estimates
 - b. Increased access to existing funding appropriations in mainstream services
 - c. Increased funding for infrastructure renewal and capital works across the sector
 - d. The extent of the take up of proposals outlined in public and pre-budget submissions

- 2 Extent of NACCHO representation on key national advisory groups and committees

- 3 Increased media coverage and social media profile



STRATEGIC PRIORITY 2

Together, with members, deliver excellent services

This involves leadership, recruiting, training and retaining the workforce, providing cultural intelligence, better access to Medicare, the implementation of a core services framework and the strengthening of key preventative measures.

Actions

1. Continue to develop and implement a National Health Framework
2. Strengthen measures focussed on prevention to avoid long-term health issues and maximise existing health investments
3. Continue to support ACCHOs so that the sector remains well-positioned to respond to pandemics and emerging crises (e.g., fires, floods, and the impact of climate change)
4. Continue to support emerging and new ACCHOS
5. Continue to support ACCHOs in making better use of Medicare
6. Address workforce supply and retention issues, so that a highly trained workforce is supported across the sector and in key new related areas (e.g., aged care and NDIS)
7. Continue to support the Coalition of Peaks and its work in progressing the new National Agreement on Closing the Gap

KPIs

- 1 Successful co-design and roll-out of 500 Aboriginal and Torres Strait Islander health traineeships
- 2 Improved RTO funding arrangements in the sector
- 3 Implementation of the Core Services Framework
- 4 Increased access to Medicare

STRATEGIC PRIORITY 3

Promote strong governance practices

This involves the implementation of robust governance processes for the NACCHO Board, executive and staff and the development of a strongly aligned sector with clear shared priorities and accountability.

Actions

1. Ensure the principles of community control are imbued in all levels of governance in the organisation
2. Facilitate leadership opportunities and succession planning in NACCHO and across the sector
3. Governance reform to meet future requirements in a changing landscape to facilitate effective leadership and protect the reputation of the sector
4. Provide advice and training to members on governance issues and mechanisms
5. Build a focused and capable trusted organisation which has national credibility and the gravitas of a national leader and expert
6. Grow the capacity of the Secretariat's capacity to drive the strategy, including in marketing, policy, evidence, and network collaboration
7. Strengthen the relationships with state and territory peaks (including data sharing and the ability to promulgate best-practice)

KPIs

- 1 Board members offered governance training, are involved in the Board committees, and participate in an annual Board performance review
- 2 Successful annual national youth conferences and national members conferences held annually
- 3 Engagement of state peaks via the NACCHO CEOs Forum, Medical Advisory Group, and policy officer's network
- 4 Provision of leadership development opportunities, governance resources, training and workshops for ACCHO boards and CEOs across Australia

STRATEGIC PRIORITY 4

Further strengthen NACCHO's knowledge-base and capability of the sector

This involves increased access to medical technologies, business technology, the development of a strong evidence base, good data governance practices, and the capacity to extend the ACCHO model into related sectors (e.g., aged care and NDIS).

Actions

1. Lead the development of a national strategy on the social determinants of health that identifies key evidence-based policies and programs
2. Build stronger data capacity and ensure improved data governance arrangements are in place
3. Support digital health initiatives and technologically enabled care (medical and business)
4. Continue to develop and implement the Continuous Quality Improvement (CQI) framework
5. Improve NACCHO's capacity to undertake national service mapping of the community-controlled sector to identify areas with high need, primarily through levels of preventable admissions and deaths and inadequate servicing
6. Ensure a central role for ACCHOs in national initiatives that enable improved service integration and access to quality care at local levels

KPIs

- 1 Improved engagement of NACCHO in national initiatives, such as My Health Record, Primary Health Networks, integrated care models, telecommunications initiatives, and leading nationally funded health research
- 2 Ensuring data sovereignty is secured in all research and that the integrity of data in the sector is maintained and is under Aboriginal control
- 3 Improved performance reporting
- 4 Conduct satisfaction surveys of all members and the development of an effective database to improve NACCHO's knowledge of the membership base

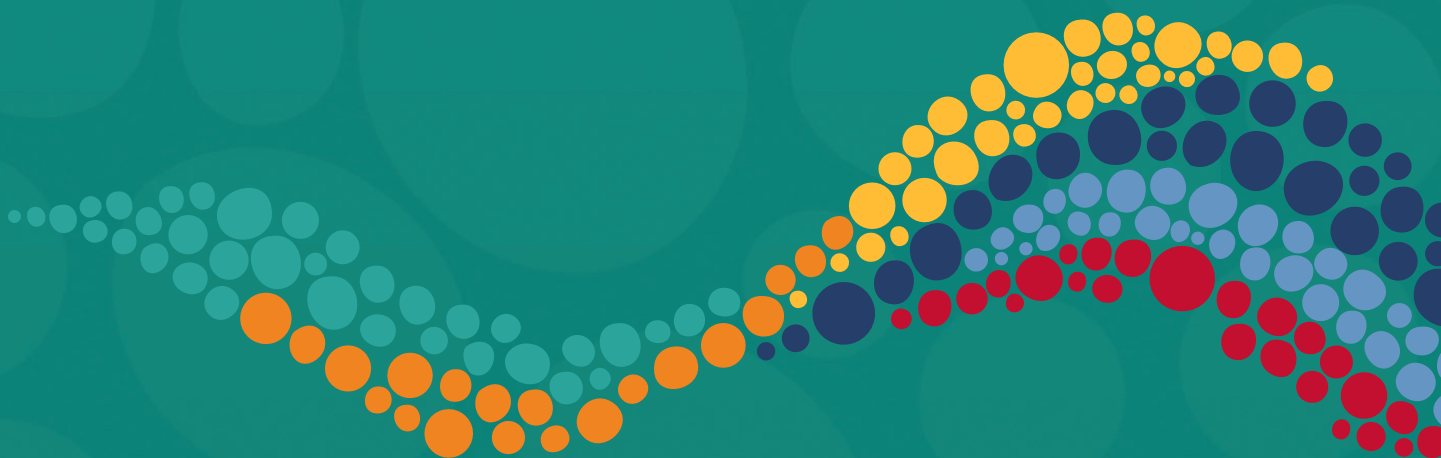


Level 5 East, 2 Constitution Avenue
Canberra City ACT 2601

GPO Box 299
Canberra ACT 2601

T: (02) 6246 9300

E: reception@naccho.org.au



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Aboriginal health in Aboriginal hands