





between



the Aboriginal and Torres Strait Islander Community Controlled Health Organisations that comprise the Institute for Urban Indigenous Health regional network

- Takes a whole of health system approach that effectively harnesses the respective strengths of Hospital and Health Services, Children's Health Queensland, the Mater Hospital and Community Controlled Health Services, where we work together to:
 - Deliver safe, accessible, and sustainable Aboriginal and Torres Strait Islander health services
 - Identify and co-design Aboriginal and Torres Strait Islander health service priorities to be addressed over the next ten years

To achieve First Nations Health Equity in South East Queensland by 2031, we commit to an urgent and rapid acceleration of action, that:

- Co-design and jointly implement a collective and systematic approach to engaging Aboriginal and Torres Strait Islander people across South East Queensland
- Reorient local health systems to maximise available resources, identify and fill service gaps, and minimise duplication
- Develop a set of performance measures and a monitoring framework to guide efforts to achieve equity of outcomes in South East Queensland by 2031
- Strengthen the service interface between Hospital and Health Services and Community Controlled Health Services
- Undertake joint health service planning, including consideration of system pressures that could be alleviated by utilising the capability of the Community Controlled Health Services Sector, and identifying areas that could be transitioned to community control
- Gives effect to the National Agreement on Closing the Gap 2020 wherever possible by:
 - Acknowledging that Aboriginal Community Controlled Services are better for Aboriginal and Torres Strait Islander people, achieve better results and employ more Aboriginal and Torres Strait Islander people, and are often preferred over mainstream services (Clause 43)
 - Agreeing to implement measures to increase the proportion of services delivered by Aboriginal and Torres Strait Islander organisations, particularly community-controlled organisations, including by implementing funding prioritisation policies across all Closing the Gap outcomes that require decision about the provision of services to Aboriginal and Torres Strait Islander people and communities, to preference Aboriginal and Torres Strait Islander community-controlled organisations and other Aboriginal and Torres Strait Islander organisations (Clause 55)
 - Ensuring that investment in mainstream institutions and agencies will not come at the expense of investment in Aboriginal and Torres Strait Islander community-controlled services (Clause 66)
 - Increasing the amount of government funding for Aboriginal and Torres Strait Islander programs and services going through Aboriginal and Torres Strait Islander community-controlled organisations (Priority Reform 2)
- Takes a regional and systems approach to the development and implementation of a regional First Nations Health Equity Strategy and subregional implementation plans, including joint monitoring of progress in achieving agreed goals and targets
- Promotes and strengthens Aboriginal and Torres Strait Islander leadership at all levels of the health system and increases overall proportions of Aboriginal and Torres Strait Islander staff
- Enables collaboration with other government agencies and service providers to address the social determinants of health
- Implements actions to eliminate institutional racism in policies and processes across the health system
- Measures our progress by reporting at least every two years against agreed key performance indicators, targets, and baselines.

North Hospital and Health Service

Metro North



Metro South Hospital and Health Service



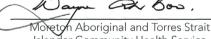


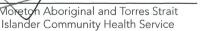
Gold Coast Health

















Aboriginal and Torres Strait Islander Community Health Service Brisbane



Yulu-Burri-Ba Aboriginal Corporation for Community Health



Gold Coast Hospital and Health Service



Mater Misericordiae Ltd



Corporation for Health

Institute for Urban Indigenous Health



















