Preamble

Aboriginal and Torres Strait Islander people are the oldest living people to walk on country. First Nations communities maintain a strong connection to culture, customs, language, laws and traditional lands, contributing significantly to environmental management, economic development and cultural identity. South East Queensland has one of the largest Aboriginal and Torres Strait Islander populations in Australia. Due to the gap in life expectancy, this population is also a younger population and more rapidly growing with this forecast to increase considerably over the next ten years. Metro South Hospital and Health Service has the opportunity to redesign the way it develops and delivers its services using co-design and co-delivery approaches and empowering the right of self-determination amongst Aboriginal and Torres Strait Islander people. By redesigning a health service that sees more First Nations people employed across the system, listens to First Nations voices in the system, and supports a better integrated and coordinated system for First Nations peoples, Metro South Health will ensure its services are equitable for all people and help close the gap in health outcomes.

Policy and planning context

Multiple national, state and local policies and strategies are in place to support the achievement of better outcomes for First Nations people. This has been further strengthened by requiring each Hospital and Health Service to achieve health equity for and with Aboriginal and Torres Strait Islander people via the Hospital and Health Boards Regulation 2012, prescribing that each Hospital and Health Service develop a First Nations Health Equity Strategy. This Health Equity Strategy sits within the policy context of the National Agreement on Closing the Gap 2020 which aims to overcome the inequality in life outcomes experienced by First Nations peoples compared to other Australians, and will accelerate the pace of health system reform in Queensland.

At a regional level, the South East Queensland First Nations Health Equity Strategy 2022–2031 (SEQ FNHES) will guide the hospital and health services to work together to ensure an equitable approach to health care across hospital and health service boundaries. Metro South Health will contribute to the delivery and measurement of objectives in the SEQ FNHES where they intersect with local needs. At a hospital and health service level, the Metro South Health First Nations Health Equity Strategy 2022–2025 complements the Metro South Health Strategic Plan 2021–2025, the Metro South Health Consumer and Community Engagement Strategy 2020–2022 and our Partnership Protocol with the Brisbane South Primary Health Network to ensure planning is values based, responsive and collaborative, and meets the needs of the community in the Brisbane South catchment.

Acknowledgement of Country

Metro South Health recognises and pays respect to the traditional custodians of the land and waters—the Yugambeh, Quandamooka, Jaggera, Ugarapul and Turrbal peoples—and to Elders, past, present and emerging.

Email contact: MSH_ATSIHD@health.qld.gov.au
Metro South Health | First Nations Health Equity Strategy 2022–2025

Our vision for health equity
» Improved access to and experience of health services for First Nations people.
» Parity of health outcomes between First Nations people and other residents of South East Queensland.
» Elimination of institutional and interpersonal racism within the health system.

Our health equity values
» Partnerships built on trust, mutual respect, transparency, and shared decision making.
» Accountability to the First Nations Communities who access our services for the delivery of an integrated health service system that harness the capabilities of both Hospital and Health Services and Community Controlled Health Services.
» Evidence based and community informed health care.
» Culturally Safe service delivery environments that respect our First Nations employees and clients and are free of racial discrimination.

Our plan

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<tr>
<th>Priority Area 1</th>
<th>Actively eliminate racial discrimination and institutional racism within the service</th>
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| **Our Actions** | 1. Embed cultural safety and cultural capability programs which are co-designed with First Nations people across all Metro South Health Directorates.  
2. Embed First Nations voices in corporate governance and decision-making.  
3. Ensure service improvement activities are oversighted by both clinical and cultural governance arrangements. |

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<th>Priority Area 2</th>
<th>Increase access to healthcare services</th>
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| **Our Actions** | 1. Establish models of care that deliver care closer to home in partnership with Community Controlled Health Services.  
2. Improve integration of care by strengthening the interface between primary, community and secondary care.  
3. Work with Community Controlled Health Services and other primary care providers to improve discharge following a hospital admission.  
4. Improve local engagement and partnerships between Metro South Health, the community, community controlled health organisations and other stakeholders to address identified needs and service gaps. |

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<th>Priority Area 3</th>
<th>Influence the social, cultural and economic determinants of health</th>
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| **Our Actions** | 1. Collaborate with our partners to develop and deliver health promotion and prevention programs which target the needs of First Nations people.  
2. Ensure First Nations people have access to preventative public health interventions.  
3. Collaborate with partners to develop a regional response to address the determinants of health. |

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<th>Priority Area 4</th>
<th>Deliver sustainable, culturally safe and responsive healthcare services</th>
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| **Our Actions** | 1. Deliver high quality and safe healthcare to First Nations people.  
2. Provide consumers information about their rights and feedback mechanisms that enable them to report their experiences of healthcare in Metro South Health.  
3. Develop mechanisms to improve completion rates of First Nations status identification across all patient systems. |

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<th>Priority Area 5</th>
<th>Work with First Nations peoples, community and organisations to design, deliver, monitor and review health services</th>
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| **Our Actions** | 1. Establish strong engagement structures, communication processes and cultural protocols to ensure First Nations people are involved in co-designing the way health services are planned and delivered in Metro South Health.  
2. Develop action plans to ensure Metro South Health embeds a consolidated approach to the implementation of the National Safety and Quality Health Standards (NSQHS).  
3. Build on and replicate effective service delivery partnership models already established in South East Queensland. |

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<th>Priority Area 6</th>
<th>Strengthen the First Nations Workforce</th>
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| **Our Actions** | 1. Contribute to the development of a SEQ regional workforce strategy.  
2. Develop and implement a MSH First Nations Workforce Strategy that leverages the regional strategy.  
3. Ensure the First Nations Workforce is supported by cultural models of supervision, mentoring, and peer support. |

Our Measures

- Decreased potentially avoidable deaths.
- Increased proportion of Aboriginal and Torres Strait Islander babies born to First Nations mothers and non-Aboriginal and Torres Strait Islander mothers with healthy birthweights.
- Sustain a decreased rate and count of First Nations suicide deaths.
- Increased proportion of First Nations adult patients on the general care dental waitlist waiting for less than the clinically recommended time.
- Elective surgery—increased proportion of First Nations patients treated within clinically recommended time.
- Specialist outpatient—decreased proportion of First Nations patients waiting longer than clinically recommended for their initial specialist outpatient appointment.
- Increased proportion of First Nations people receiving face-to-face community follow up within 1–7 days of discharge from an acute mental health inpatient unit.
- Increased proportion of First Nations people completing Advance Care Planning.
- Annual (year-on-year) increased First Nations workforce representation to demonstrate progress towards achieving workforce representation at least commensurate to the local Aboriginal and Torres Strait Islander population.
- Increased proportion of Aboriginal and Torres Strait Islander people who had their cultural and spiritual needs met during the delivery of a healthcare service (inpatient PREMS survey).