



The Royal
Children's
Hospital
Melbourne

Reconciliation Action Plan 2016-17



RECONCILIATION
ACTION PLAN
REFLECT



Our business

The Royal Children's Hospital (RCH) in Melbourne is a leading provider of specialist public health services for children and adolescents and is the major specialist paediatric hospital in Victoria, caring for children from Tasmania and southern New South Wales as well as other states around Australia and overseas.

With a staff of over 4,500 and an annual operating budget of over \$500million, the RCH has an international reputation as a centre of clinical excellence and is a state-wide teaching, training and research hospital providing tertiary, secondary and primary infant, child and adolescent health services. RCH partners with the Murdoch Childrens Research Institute and the University of Melbourne, creating a paediatric health science campus, Melbourne Children's. At present it is unclear how many Aboriginal and Torres Strait Islander staff work across RCH, however within the Wadja Aboriginal Family Place there are six Aboriginal staff members.

Our Reconciliation Action Plan

The RCH is committed to being a great children's hospital and we recognise that a determination to help bridge the gap in healthcare between Aboriginal and Torres Strait Islander children and their non-Aboriginal and Torres Strait Islander counterparts is integral to and inseparable from this vision.

We acknowledge the historical and ongoing realities that impede Aboriginal and Torres Strait Islander children, young people, their families and their communities from enjoying the same level of health and wellbeing and access to quality healthcare services as that enjoyed by other Australian families. We recognise the role of past policies and practices in creating and sustaining inequity including, notably, the forced removal of Aboriginal and Torres Strait Islander children from their families and communities including the role of the RCH in this practice. We recognise also that Aboriginal and Torres Strait Islander peoples are not adequately represented in our workforce, and will work to understand and address the obstacles

that prevent the RCH being an employer of choice for Aboriginal and Torres Strait Islander peoples.

Over the past decade the RCH has developed and implemented a range of initiatives that demonstrate our commitment to reconciliation, and which measurably improve experiences and outcomes for our Aboriginal and Torres Strait Islander patients and their families. But we understand the magnitude of the work yet to be done here, and beyond the walls of the RCH. The RCH *Reconciliation Action Plan 2016-17* is the roadmap by which we will reflect, plan and assess our progress in working to close the gap in health service provision, access and outcomes.

The plan is championed by the hospital's Board and Executive, staff, and representatives from across multiple departments and clinical areas. The members of the RCH Aboriginal Liaison Policy Advisory Committee, and Aboriginal staff of the Wadja Family Place were also central to the development of the plan.

Our partnerships/current activities

FOUNDATION STATEMENT

In 1999 the staff and management of the RCH worked with representatives of the Victorian Koori Community to develop a statement which could become the foundation of the hospital's work with, and for, Aboriginal children and families.

The statement was endorsed by the then RCH Aboriginal Liaison Hospital Policy Advisory Committee. The statement is:

The Royal Children's Hospital is unreservedly committed to improving the poor health status of Aboriginal people through the ongoing provision of a quality of service that is at all times culturally affirming and sensitive to the needs of Aboriginal Families.

The Royal Children's Hospital acknowledges both the historical and current barriers that have impeded, and continue to impede, Aboriginal families from accessing services that The Royal Children's Hospital provides.

The Royal Children's Hospital embraces the belief that it is the right of all Aboriginal Children, Young People, Families and their communities, to enjoy equality of access to culturally appropriate services.



RELATIONSHIPS



RESPECT



OPPORTUNITIES

WADJA ABORIGINAL FAMILY PLACE

The Wadja Aboriginal Family Place has been specifically designed to improve health outcomes for Aboriginal children and young people by providing a culturally sensitive and responsive service to Aboriginal patients of the RCH, and their families.

Established in 2009 as a five-year, philanthropically funded pilot project, Wadja Aboriginal Family Place operates under the auspice of the Social Work Department in the Division of Nursing Service and Allied Health, reporting to the Executive Director, Nursing and Allied Health.

Funding has been secured for a further five years. Wadja Aboriginal Family Place includes a team of four Aboriginal Case Managers and an Aboriginal Team Leader, all designated Indigenous roles.

The service also includes two non-Aboriginal sessional paediatricians. In 2015 a Wadja Nurse Coordinator joined the team, the first designated Aboriginal nursing role at the RCH; and a half time registrar will be appointed using funds provided by the Royal Australasian College of Physicians. In addition, the RCH employs a Koori Emotional and Social Wellbeing Officer through the Mental Health service. This position is not part of the Wadja service however close links exist between the services to ensure coordinated care for patients attending the RCH.

The service has four key objectives: Cultural safety, systems change, community focus and data. Since the Wadja service began we have seen significant growth in the numbers of Aboriginal identified patients attending the RCH, and we anticipate that this number will continue to grow as the Wadja service becomes better known to and trusted by the community.

WADJA HEALTH CLINIC

The Wadja Health Clinic is a weekly general medical clinic for Aboriginal children and young people and their families, to improve access to mainstream but culturally safe health care via the Wadja service's Aboriginal health team.

There remain multiple social, cultural and practical barriers which negatively impact on families' capacity to engage with health care services and the Wadja model of care works to reduce these barriers to access.

THE RCH CLOSE THE GAP STATEMENT OF INTENT

The RCH *Close the Gap Statement of Intent* was signed on May 25, 2012 and is permanently displayed in Specialist Clinics, the busy out-patients area of the hospital which provides close to 250,000 appointments annually. The signatories were the Victorian Minister for Health, the RCH Chairman, the Aboriginal & Torres Strait Islander Social Justice Commissioner, and the Chair of the Victorian Aboriginal Community Controlled Health Organisation.

The Statement of Intent includes an excerpt from former Prime Minister Kevin Rudd's apology to the Stolen Generations, a preamble, and commits the RCH to the following:

- Ensuring primary health care services and health infrastructure for Aboriginal and Torres Strait Islander peoples which are capable of bridging the gap in health standards by 2018
- Ensuring the full participation of Aboriginal and Torres Strait Islander peoples and their representative bodies in all aspects of addressing their health needs
- Working collectively to systematically address the social determinants that impact on achieving health equality for Aboriginal and Torres Strait Islander peoples

- Building on the evidence base and supporting what works in Aboriginal and Torres Strait Islander health, and relevant international experience
- Supporting and developing Aboriginal and Torres Strait Islander community-controlled health services in urban, rural and remote areas in order to achieve lasting improvements in Aboriginal and Torres Strait Islander health and wellbeing
- Achieving improved access to, and outcomes from, mainstream services for Aboriginal and Torres Strait Islander peoples
- Respecting and promoting the rights of Aboriginal and Torres Strait Islander peoples, including by ensuring that health services are available, appropriate, accessible, affordable, and of good quality; and, measuring, monitoring, and reporting on efforts, in accordance with benchmarks and targets.

THE RCH CULTURALLY APPROPRIATE HEALTHCARE DELIVERY PROCEDURE

The RCH Culturally Appropriate Healthcare Delivery procedure was developed to establish clear accountabilities around the provision of culturally safe and appropriate care for Aboriginal children and their families, and outlines specific steps that must be taken during the admission and treatment of Aboriginal patients.

The procedure ensures Aboriginal patients and their families can access best practice service provision in line with the Victorian Government framework, *Improving Care for Aboriginal and Torres Strait Islander Patients*.

The procedure is based on the principle that the RCH will provide a culturally safe environment where Aboriginal families feel comfortable and unthreatened when seeking health care for their children, and where an Aboriginal patients' cultural identity informs health care delivery;

and stipulates the involvement of the Wadja Aboriginal Family Place staff as an integral part of the treating team in order to provide a culturally safe experience for Aboriginal patients.

The procedure stipulates that staff inviting Aboriginal visitors into the hospital or planning to display Aboriginal cultural material first consult with Wadja Aboriginal Family Place, and likewise that Wadja staff (via the Aboriginal Liaison Policy Advisory Committee) be consulted about all research, surveys or programs related to Aboriginal children and families that may be held in, run by or organised by the RCH.

CROSS-CULTURAL EDUCATION

The procedure also provides guidelines around measures to raise Aboriginal cultural awareness across the RCH workforce. An online cross cultural education tool is available on the intranet, and all new RCH staff are required to access this tool as part of their orientation.

Wadja Aboriginal Family Place also provides cross cultural education to departments upon request and links staff into the online tool for further information. Wadja Aboriginal Family Place is linked into staff professional development, staff orientation and student teaching sessions provided at the RCH on request.

NATIONAL SORRY DAY

National Sorry Day is marked each year at the RCH by a moving ceremony hosted by the Chair of the RCH Board and attended by the CEO and Executive together with staff from across the hospital, alongside Aboriginal patients and families. It includes a flag raising, and a dedicated Sorry Day book which is updated each year with comments and contributions from hospital staff.

This is an important internal event which enables the RCH community to recognise the personal devastation, pain and loss experienced by the Stolen Generations, their families and

communities; and particularly on the children of these communities, to whom we provide services every day and upon whom the practice of forced removal continues to impact.

In 2012 patients, families and staff of the RCH embarked on a special arts project to build a stick sculpture called 'Bunjil's Nest', as a means of introducing the hospital community to the Aboriginal culture and history of the area. Bunjil is the mythological wedge-tail eagle regarded as the spirit creator of the Kulin nation, which includes the Wurundjeri people. The RCH Bunjil's Nest was crafted in Main Street, the hospital's atrium and entrance foyer, as a growing installation. The project was initiated by the RCH Education Institute and Wadja Aboriginal Family Place, and took shape within days.

Patients, families, visitors and staff contributed sticks with messages of hope for an environmentally-sustainable future and health for the community, and acknowledged how Aboriginal people have used the land in a sustainable way for more than 70,000 years.

The completed nest was showcased at a NAIDOC Week ceremony in July by Wurundjeri Elder Bill Nicholson and now has a permanent home in the east garden near Wadja Aboriginal Family Place.

WHO IS YOUR MOB?

Created during the 2013 Wadja Cultural Day and published during NAIDOC week 2014, '*Who is Your Mob?*' tells the stories and showcases the artwork of RCH Aboriginal patients and staff. The book was a collaboration between the Wadja Aboriginal Family Place team, the RCH Education Institute, the RCH Educational Resource Centre and the RCH Foundation, which sourced philanthropic funds to enable the book's publication.

This truly collaborative project brings to life our Aboriginal patients' stories and paintings, alongside an exploration and discovery of the unique features of the RCH.

'*Who is Your Mob?*' aims to demystify the hospital experience for Aboriginal families and will be used across the RCH to build awareness and understanding, and has also been distributed to Aboriginal health services around Victoria as a resource for communities. It encourages children to explore non-clinical features of the hospital including the meerkat enclosure, playground and aquarium and includes positive images of Aboriginal children to contribute to these patients' sense of safety and belonging. '*Who is Your Mob?*' is an important tool in assisting Aboriginal children to understand their hospital experience and relate this to their family, community and culture.

The book launch, during NAIDOC week 2014, coincided with an Open Morning at Wadja Aboriginal Family Place during which community, patients and staff shared morning tea.

ABORIGINAL LIAISON POLICY ADVISORY COMMITTEE

The Aboriginal Liaison Policy Advisory Committee (ALPAC) explores options and identifies resources to support the RCH to be a leading example of practice in acute paediatric health care for Aboriginal patients and families.

ALPAC provides advice to the RCH to ensure the discipline of cultural safety for Aboriginal patients and families is being demonstrated in the patient journey and identifies opportunities for the Aboriginal community to support the RCH in meeting the key result areas of the Department of Health's Improving Care for Aboriginal Patients (ICAP) Program. ALPAC offers feedback to the RCH on the hospital's performance against the targets of the Closing the Gap framework, which

includes closing the gap in life expectancy within a generation, lowering infant mortality and decreasing low birth weight of Indigenous children.

ALPAC is comprised of Aboriginal Elders, Aboriginal Health Workers, community members, ICAP policy advisors and staff from the hospital, including from Social Work, the Education Institute and the Executive. The committee is co-chaired by the Executive Director, Nursing and Allied Health, and an appointed member of the community. Meetings are held bi-monthly from February to December, and alternate community venues are sought.

RURAL OUTREACH PROJECT

During 2012-2013, Wadja Paediatrician Dr Renata Kukuruzovic together with staff of Wadja Aboriginal Family Place undertook a series of community outreach visits across rural and regional Victoria. The team visited 20 of 26 Aboriginal Community Controlled Health Organisations across the state. The aim of this project was to promote community engagement, strengthen partnership with Aboriginal organisations and provide information to local health organisations about the services provided by Wadja Aboriginal Family Place at the RCH.

The outreach project highlighted the importance of reducing barriers experienced by rural Aboriginal families attending the RCH. Good communication is essential through telephone contact, discharge summaries, telehealth and coordination of appointments. The project led to an Open Day for Aboriginal Community Controlled Health Organisations hosted by Wadja at the RCH in early 2014.

The Open Day was well attended and evaluation feedback was positive. Wadja is committed to maintaining and strengthening strong relationships with Aboriginal health organisations across Victoria as a core aspect of its model of care.

THE CONTINUOUS QUALITY IMPROVEMENT TOOL

The Department of Health (Koori Health Branch) requires all Victorian health services to report annually against a number of key result areas in the delivery of Aboriginal health services.

The Continuous Quality Improvement (CQI) tool is led by the Manager of Aboriginal Health Services and Executive Sponsor of Aboriginal Health with input from the Wadja Aboriginal Family Place staff and Koori Social and Emotional Wellbeing Officer. The tool is reviewed and approved by the RCH Aboriginal Liaison and Policy Advisory Committee and signed off by the CEO before submission to Department of Health.

Key result areas in the CQI Tool are:

- Engagement and partnerships
- Organisational development
- Workforce development, and
- Systems of care.

The CQI tool enables self-assessment against these domains together with a summary of key achievements during the calendar year.



RELATIONSHIPS

ACTION	DELIVERABLE	TIMELINE	RESPONSIBILITY
1. RAP Working Group (RWG) actively monitors RAP development and implementation of actions, tracking progress and reporting	RWG oversees the development, endorsement and launch of the RAP	July 2016	Manager, Social Work and Aboriginal Health
	Ensure Aboriginal and Torres Strait Islander peoples are represented on the RWG	July 2016	
	Meet at least twice per year to monitor and report on RAP implementation	July 2016	
	Review the Terms of Reference for the RWG to ensure that it is up to date and relevant	December 2016	
	Develop and distribute an expression of interest to join the RWG to key Aboriginal and Torres Strait Islander peoples within our sphere of influence	December 2016	
2. Build internal and external relationships	Develop a list of Aboriginal and Torres Strait Islander peoples, communities and organisations within our local area or sphere of influence that we could approach to connect with on our reconciliation journey	August 2016	Wadja Team Leader and Case Managers
	Develop a list of RAP organisations and other like-minded organisations that we could approach to connect with on our reconciliation journey	September 2016	
3. Participate in and celebrate National Reconciliation Week (NRW)	Encourage our staff to attend a NRW event	27 May – 3 June 2017	Executive Director Communications
	Circulate Reconciliation Australia's NRW resources and reconciliation materials to our staff	May 2017	
	Ensure our Working Group participates in an external event to recognise and celebrate NRW	May 2017	Manager, Social Work and Aboriginal Health
4. Raise internal awareness of our RAP	Develop and implement a plan to raise awareness amongst all staff across the organisation about our RAP commitments	October 2016	Executive Director Communications
	Develop and implement a plan to engage and inform key internal stakeholders of their responsibilities within our RAP	October 2016	Executive Sponsor Aboriginal Health
5. Strengthen existing partnerships with Aboriginal and Torres Strait Islander peoples and organisations	Review of ALPAC (Aboriginal Liaison and Policy Advisory Committee) membership	August 2016	Executive Sponsor Aboriginal Health



RESPECT

ACTION	DELIVERABLE	TIMELINE	RESPONSIBILITY
6. Investigate Aboriginal and Torres Strait Islander cultural learning and development	Develop a plan for increasing awareness of Aboriginal and Torres Strait Islander cultures, histories and achievements within our organisation	March 2017	Executive Sponsor Aboriginal Health
	Capture data and measure our staff's current level of knowledge and understanding of Aboriginal and Torres Strait Islander cultures, histories and achievement	April 2017	Executive Director People and Culture
	Conduct a review of cultural awareness training needs within our organisation	May 2017	
7. Participate in and celebrate NAIDOC Week	Raise awareness and share information among our staff of the meaning of NAIDOC Week which includes information about the local Aboriginal and Torres Strait Islander peoples and communities	July 3 – July 10 2016	Executive Director Communications
	Introduce our staff to NAIDOC Week by promoting community events in our local area		Wadja Team Leader
	Ensure our Working Group participates in an external NAIDOC Week event		
8. Raise internal understanding of Aboriginal and Torres Strait Islander cultural protocols	Explore who the Traditional Owners are of the lands and waters in our local area	October 2016	Wadja Team Leader and Case Managers
	Scope and develop a list of local Traditional Owners of the lands and waters within our organisations sphere of influence	November 2016	
	Develop and implement a plan to raise awareness and understanding of the meaning and significance behind Acknowledgement of Country and Welcome to Country protocols (including any local cultural protocols)	February 2017	Executive Director Communications
	Consult with Traditional Owners, Elders and local communities about preferred and acceptable language	December 2017	Wadja Team Leaders and Case Managers
9. Acknowledge Aboriginal and Torres Strait Islander dates of significance	Continue to commemorate Sorry Day annually with a flag raising and event	May 2017	Program Manager Aboriginal Health



OPPORTUNITIES

ACTION	DELIVERABLE	TIMELINE	RESPONSIBILITY
10. Investigate Aboriginal and Torres Strait Islander employment	Develop a workforce plan for Aboriginal and Torres Strait Islander employment within our organisation	May 2017	Executive Director People and Culture
	Identify current Aboriginal and Torres Strait Islander staff to inform future employment and development opportunities	June 2017	
	Investigate Aboriginal and Torres Strait Islander employment pathways (e.g. traineeships or internships)	July 2017	
11. Investigate Aboriginal and Torres Strait Islander supplier diversity	Develop an understanding of the mutual benefits of procurement from Aboriginal and Torres Strait Islander owned businesses within the RCH and Government Procurement Guidelines	July 2017	Executive Director Corporate Services and Chief Financial Officer
12. Investigate an internal or external Aboriginal and Torres Strait Islander professional mentoring network.	Discuss appropriate arrangements for cultural supervision and support activities with local Elder	December 2016	Wadja Team Leader and Case Managers
13. Support Aboriginal and Torres Strait Islander Leadership	Promote leadership skill development for Wadja Team Leader by identifying leadership training opportunities and on-the-job opportunities such as chairing meetings, developing work plans and representing the hospital to internal and external stakeholders	December 2016	Program Manager Aboriginal Health

TRACKING AND PROGRESS

ACTION	DELIVERABLE	TIMELINE	RESPONSIBILITY
14. Build support for the RAP	Define resource needs for RAP development and implementation	August 2016	Executive Sponsor Aboriginal Health
	Define systems and capability needs to track, measure and report on RAP activities	October 2016	
	Complete the annual RAP Impact Measurement Questionnaire and submit to Reconciliation Australia	30 Sept, annually	
15. Review and refresh RAP	Review and refresh RAP based on learnings, challenges and achievements.	November 2017	
	Submit draft RAP to Reconciliation Australia for formal review and endorsement.	December 2017	

For more information

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Cover artwork: *Going Home* by Lisa Kennedy

Lisa is a Trawlwoolway artist, children's book author, and illustrator based in South Gippsland, Victoria. *Going Home* was created especially for the RCH Wadja Aboriginal Family Place, a culturally sensitive service for Aboriginal and Torres Strait Islander children and their families.

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