

A. Entity responses

As mandated in Section 64 of the *Auditor-General Act 2009*, the Queensland Audit Office gave a copy of this report with a request for comments to the Department of Health and all HHSs.

We also provided a copy of the report to the following people and gave them the option of providing a response:

- the former Minister for Health and Ambulance Services*
- chairs of the boards of the 16 hospital and health services
- chief executive officers of the 16 hospital and health services.

We provided a copy of this report to the Premier and Minister for the Olympic and Paralympic Games and the Director-General, Department of the Premier and Cabinet for their information.

* Changes to ministers and portfolios were announced in *Administrative Arrangements Order (No. 1) 2023* made by Governor in Council on 18 May 2023.

This appendix contains their detailed responses to our audit recommendations.

The heads of these entities are responsible for the accuracy, fairness, and balance of their comments.



Comments received from Director-General, Queensland Health



Queensland Health

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Our ref: C-ECTF-23/5262

Auditor-General
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Dear Auditor-General

Thank you for your email dated 8 May 2023, regarding the proposed report *Performance Audit – Health outcomes for First Nations People*. I appreciate the opportunity to review and provide comments or commitments against the findings and recommendations.

On behalf of Queensland Health, I provide a single health system response to your report. I am proud of the work the Department of Health and Hospital and Health Services are leading and supporting across the system. However, we welcome the opportunity to improve and strengthen our efforts. I welcome the findings and recommendations within this report to help guide our future direction. As a system, we know that First Nations health equity will not be solely achieved with a simple programmatic response; instead, a continued cultural and behavioural change across the health system is necessary. As outlined in the report, supporting access to healthcare services, delivering sustainable, culturally safe and responsive services, influencing the social, cultural and economic determinants of health and, importantly, working with Aboriginal and Torres Strait Islander peoples to design and deliver these services will help us to make true change and improve the lives of our Aboriginal and Torres Strait Islander communities.

Our specific responses to findings and recommendations presented in the report are noted in Appendix 1.

Thank you for the opportunity to review the draft report, recommendations and provide feedback. Should you require further information, the Department of Health's contact is

Yours sincerely

Shaun Drummond
Director-General
30/05/2023

Appendix 1 - Response to recommendations – Performance Audit on Health outcomes for First Nations people

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Responses to recommendations



Better public services

Department of Health

Health outcomes for First Nations people

Response to recommendations provided by [redacted] Office of the Chief First Nations Health Officer, First Nations Health Office (FNHO). 29 May 2023. Response has been developed in consultation with all Hospital and Health Services (HHSs) and several Department of Health (the Department) Divisions.

- Supporting the realisation of Queensland Health's recently released vision of a dynamic and responsive health system (HEALTHQ32) are seven system priority strategies that will drive the future direction for health in Queensland: Reform; First Nations; Workforce; Consumer Safety and Quality; Health Services; Public Policy and Research.
- The First Nations Health Strategy (to be released by 30 June 2023) sets a 10-year course in the pursuit of excellence in care and health equity for all First Nations peoples in Queensland. In alignment with the National Agreement on Closing the Gap (2020) and the Hospital and Health Boards (Health Equity Strategies) Amendment Regulation 2021, Queensland Health is committed to addressing health inequity and achieving life expectancy parity for Aboriginal and Torres Strait Islander people in Queensland by 2031.
- The purpose of the First Nations Health Strategy is to lead Queensland Health in accelerating the reform efforts and improve the health and wellbeing outcomes for First Nations peoples for generations to come. The strategy utilises a centrally supported and regionally enabled approach to eliminate racism, re-shape the system, transform care and strengthen the workforce (the four focus areas for this strategy). The recommendations and insights provided by this QAO audit have been considered in the development of the First Nations Health Strategy.
- The First Nations Health Strategy is underpinned by the 16 HHSs Health Equity Strategies, which were all co-designed with the Aboriginal and Torres Strait Islander community-controlled health sector in Queensland. Therefore, the Department (led by the FNHO) will undertake a co-design approach with the Queensland Aboriginal and Islander Health Council (QAIHC), as the peak body for the Aboriginal and Torres Strait Islander community-controlled health sector in Queensland in response to the recommendations.



Recommendation	Agree/ Disagree	Timeframe for implementation (Quarter and financial year)	Additional comments
We recommend all hospital and health services:			
1. publish health equity strategy implementation plans that: <ul style="list-style-type: none"> a) include specific details on how each action will be delivered and achieved b) state when each action will be completed, and the expected cost (Chapter 3) 	Agree		With the successful launch of all 16 Hospital and Health Services Health Equity Strategic plans, the Hospital and Health Services are now currently progressing their Health Equity Implementation plans in accordance with their local governance structures, commitments, and local community consultation. <i>Please note individual Hospital and Health Service responses below</i>
Cairns and Hinterland Hospital and Health Services (CHHS)	Agree	2024-2025	CHHS has developed an internal reporting tool to track and monitor service delivery activity. Completed March 2023. Expansion of Cairns and Hinterland Analytical Intelligence (CHAI) Dashboard to any new or additional Aboriginal and Torres Strait Islander performance measures. Key Performance Measures (KPM) are aligned to existing State-wide KPMs for Aboriginal and Torres Strait Islander populations. Strategy Tranche 1, 2022 – 2025. Quarterly Reporting aligned to Making Tracks Health Equity.
Central Queensland Hospital and Health Service (CQHHS)	Agree	August 2023	In preparing the implementation plan for Central Queensland we will ensure the actions, timeframes; responsible officers; monitoring is identified. The CQHHS will also be working across our individual communities to develop localised implementation plans that will be specific to overcoming the barriers for local communities in accessing health services and developing reforms required for change. A key process will be maintaining connection with the communities to ensure coordinated monitoring. Costing development work will be undertaken, though it is recognised that this may be difficult for the more strategic actions.

Recommendation	Agree/ Disagree	Timeframe for implementation (Quarter and financial year)	Additional comments
Central West Hospital and Health Service (CWHHS)	Agree	June 2023	
Children Health Queensland	Agree	28 February 2023	
Darling Downs Hospital and Health Service	Agree	2023-2024	
Gold Coast Hospital and Health Service (GCHHS)	Agree	September 2023	Gold Coast Health is currently undertaking prescribed stakeholder consultation on the Health Equity Implementation Plan. Gold Coast Health will include the recommendations and provide the expected costs in line with the First Nations Health Office direction and Legislative requirements.
Mackay Hospital and Health Service (MHHS)	Agree	2023-2024	The MHHS <i>Our Mob Together Strong Health Equity Strategy Implementation Plan</i> is in working draft and on track for finalisation in Quarter 1, 2023-24. This includes specific initiatives identified aligning with the six key priority areas, identified performance indicators, funding information, key actions, and timelines.
Metro North Hospital and Health Service (MNHHS)	Agree	2023-2024	MNHHS, <i>Our Journey towards Health Equity Strategy</i> and Implementation and Evaluation Plan developed is scheduled for public release in the first Quarter of 2023-24. MNHHS, <i>Our Journey towards Health Equity Strategy</i> has individual actions identified timeframes.
Metro South Hospital and Health Service (MSHHS)	Agree in principle	30 June 2023	MSHHS is committed to fulfilling the legislative requirements of the development, implementation, and resourcing of the First Nations Health Equity Strategy. MSHHS will develop an agreed methodology for funding the strategy and costings will be finalised through the implementation of the Strategy. MSHHS has a repurposing of underspend from the Close the Gap initiatives process and will include this in its funding methodology
North West Hospital and Health Service (NWHHS)	Agree	June 2023	

Recommendation	Agree/ Disagree	Timeframe for implementation (Quarter and financial year)	Additional comments
South West Hospital and Health Service (SWHHS)	Agree	30 June 2023	Following publication of <i>OurWay – Together</i> , the <u>South West HOSPITAL AND HEALTH SERVICE First Nations Health Equity Strategy 2022-2023</u> , a supporting implementation plan - informed by further engagement across South West communities, staff and partners - is anticipated to be completed by 30 June 2023.
Sunshine Coast Hospital and Health Service (SCHHS)	Agree	2024-2025	SCHHS Aboriginal and Torres Strait Islander Health Equity Implementation plan 2022-2025 launched January 2023. SCHHS continues to work with our partners and community to deliver outcomes from the Implementation Plan by 2025.
Torres and Cape Hospital and Health Service (TCHHS)	Agree and Disagree	June 2023	The TCHHS Health Equity Strategy (HES) Implementation Plan identifies specific actions under each KPI that will be delivered as per the timeframe stated against each action. Agree with actions documented in HES Implementation Plan, however expected costs cannot be determined as internal review of policies and procedures need to have commenced by 2025 as stated in the TCHHS Implementation Plan prior to determining expected costs after the re-evaluation of the HES in 2025. Examples of expected costs include building new infrastructure for housing TCHHS staff after potential change in current policies. Training and upskilling of staff including upgrading technology.
Townsville Hospital and Health Service (THHS)	Agree	September 2023	
West Moreton Hospital and Health Service (WMHHS)	Agree	31 May 2023	Subject to the provision of additional funding from First Nations Health Office or Department of Health. Costings are currently being finalised in line with FY24 budget builds and will be provided to the First Nations Health Office when available.
Wide Bay Hospital and Health Service (WBHHS)	Agree	3 May 2023	WBHHS Implementation 2022-2025 plan launched 3 May 2023. Specific details of deliverables are a strategic

Recommendation	Agree/ Disagree	Timeframe for implementation (Quarter and financial year)	Additional comments
			focus for the WBHHS and set out in the Implementation plan and the FNHE Strategy 2022-2025.
2. provide a local service catalogue to communities as part of their Local Area Needs Assessment process. The catalogues should clearly set out what health services are available in each community. (Chapter 5)	Agree	2024-2025	The Department and Hospital and Health Services support the development of a service catalogue. The Local Area Needs Assessment process (due to be renewed Q4 2024) may help identify services, however the catalogue will be integrated with an existing health service directory, for example, the National Health Services Directory , Inform my care , or Hospital and Health Service specific eg. - Brisbane South PHN First Nations Health Focus Directory - ensuring a more visible and accessible "catalogue."
We recommend the Department of Health works in partnerships with each hospital and health service to:			
3. develop and implement a coordinated strategy to reduce the number of First Nations people from remote and rural areas failing to attend specialist outpatient appointments. This should: <ol style="list-style-type: none"> a) identify the total number of First Nations patients who miss appointments and where they are located b) use culturally appropriate measures (such as liaison officers) to connect First Nations patients with outpatient clinics across the state (Chapter 4) 	Agree	2025-2026	The Department supports the review of data currently being captured and an ability to capture and/or strengthen First Nations patients in relation to specialist outpatient appointments, improving access to specialist outpatient clinics and discharging against medical advice. HHS are required through legislation to provide culturally appropriate care and increase access to healthcare, therefore the Department will work with HHS to: <ul style="list-style-type: none"> - strengthen the current specialist outpatient services implementation standard to reduce the number of First Nations people failing to attend specialist outpatient appointments - use culturally appropriate measures including Aboriginal and Torres Strait Islander Health Workers, Health Practitioners and Liaison Officers, to connect First Nations patients with outpatient clinics - assess the root causes behind First Nations people not attending

Recommendation	Agree/ Disagree	Timeframe for implementation (Quarter and financial year)	Additional comments
			<p>appointments, discharging from hospital against medical advice</p> <ul style="list-style-type: none"> - recognise and assess the root causes behind First Nations people not waiting to be seen in emergency departments - monitor patient complaints and identify opportunities to improve how Queensland Health delivers culturally appropriate care including using risk man - share lessons, success stories, and areas for improvement across the health system. <p>Specifically, the Department will consider the role the Queensland Aboriginal and Torres Strait Islander Clinical Network (QA&TSICN) might play in addressing the above. The QA&TSICN is a group of clinicians with Statewide, multidisciplinary representation, to explore and improve culturally appropriate, accessible, and safe health service delivery across Queensland.</p>



Recommendation	Agree/ Disagree	Timeframe for implementation (Quarter and financial year)	Additional comments
<p>4. implement a systematic way of measuring how effectively Queensland Health delivers culturally appropriate care. This should:</p> <ul style="list-style-type: none"> a) recognise and assess the root causes behind First Nations people not attending appointments, discharging from hospital against medical advice, and not waiting to be seen in emergency departments b) monitor patient complaints and identify opportunities to improve how Queensland Health delivers culturally appropriate care c) share lessons, success stories, and areas for improvement across the health system (Chapter 4) 	Agree	2025-2026	<Addressed through recommendation 3 response>



Recommendation	Agree/ Disagree	Timeframe for implementation (Quarter and financial year)	Additional comments
<p>5. implement an updated workforce strategy that addresses the key barriers to increasing the First Nations workforce. This should include provisions for recruiting and retaining Indigenous liaison officers, including having:</p> <ul style="list-style-type: none"> a) a target ratio for Indigenous liaison officers to First Nations patients in each hospital and health service b) a model that requires adequate Indigenous liaison officer coverage outside of standard hours c) adequate and secure funding to resource this function (Chapter 4) 	Agree	2023-2026	<p>The Department agrees with this recommendation which is currently being/or will be addressed through:</p> <ul style="list-style-type: none"> - The finalisation of the <i>First Nations Health Workforce Strategy for Action</i> (GEC1540), in particular strengthening the role of Aboriginal and Torres Strait Islander Health Workers, Health Practitioners and Liaison Officers across the health system. - Aboriginal and Torres Strait Islander Health Workforce Certified Agreement 2019 - All Hospital and Health Service Health Equity Strategies and Implementation Plans (workforce actions) - Establishment of a project under the leadership of the Chief First Nations Health Officer to examine workforce models of care, service reform, clinical governance, cultural scope of practice initiatives and cultural safety (GEC1541).
<p>6. improve how it helps First Nations people who must travel for healthcare, including:</p> <ul style="list-style-type: none"> a) identifying the actual number of First Nations patients accessing travel support b) making travel support easy and simple to access, with culturally appropriate processes c) formalising how it provides extra travel support for First Nations patients and making this information public. (Chapter 5) 	Agree	2024-2025	<p>FNHO will work internally with Patient Travel Subsidy Scheme (PTSS) within Corporate Services Division (CSD) to assess current arrangements and identify opportunities to strengthen future PTSS services across the HHSs.</p> <p>FNHO will engage with each HHS through the First Nations Health Leads Forum to determine the common areas for improvement and develop a plan for our First Nations patients which will be centrally supported and locally enabled.</p> <p>Additionally, several HHSs have identified patient travel assistance as a priority project within their Health Equity Strategies and Implementation plans.</p>