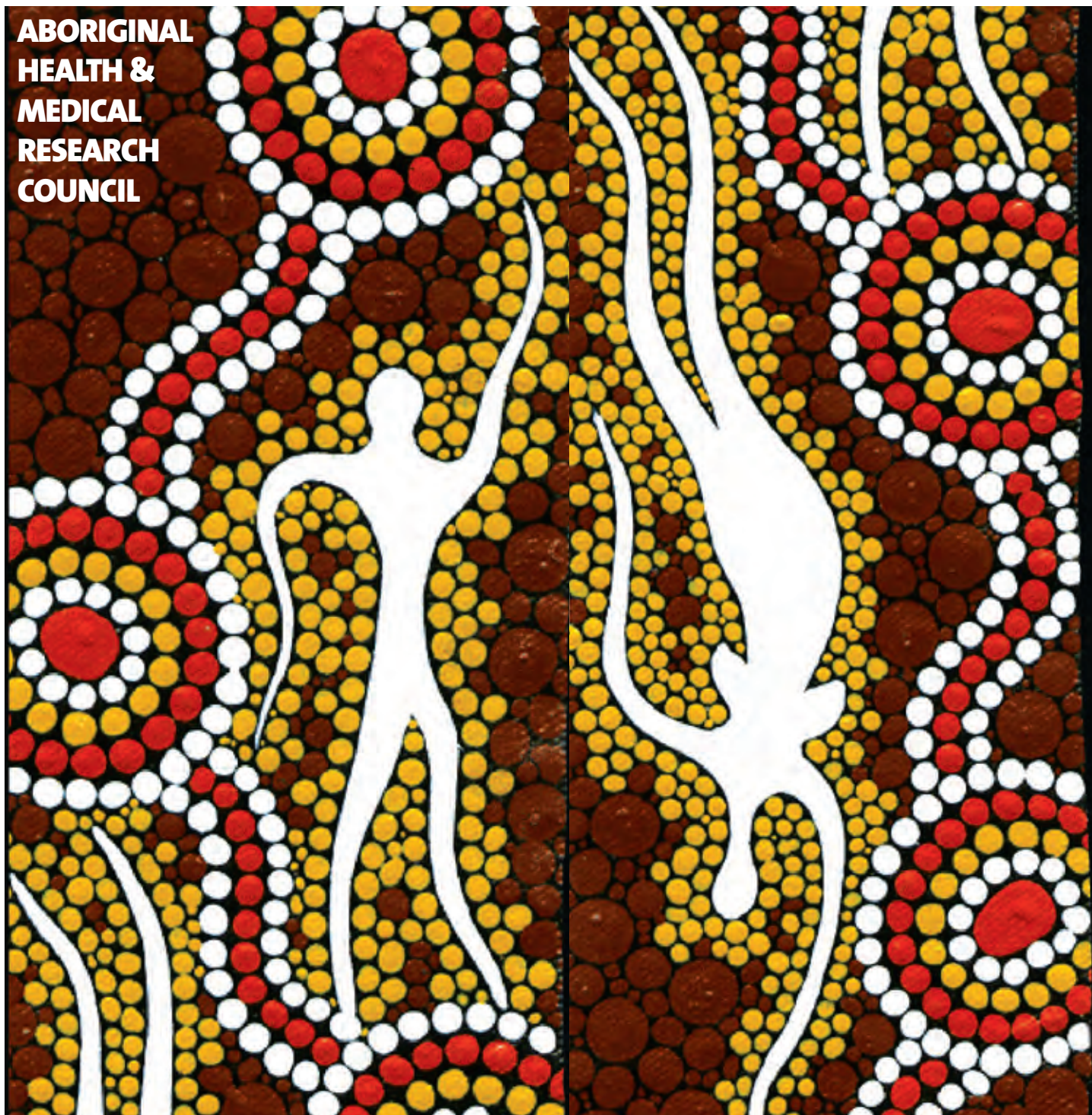


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ABORIGINAL PRACTICE CHECKLIST

A CULTURAL ASSESSMENT TOOL FOR **MERIT** TEAMS

ABORIGINAL PRACTICE CHECKLIST

A CULTURAL ASSESSMENT TOOL FOR **MERIT** TEAMS

TERMS USED TO DESCRIBE INDIGENOUS PEOPLE AND SERVICES

The term 'Aboriginal' has been used throughout this document in reference to Indigenous people and services in NSW.

The term 'Aboriginal' is used, because NSW is Aboriginal land. It is not intended to exclude Torres Strait Islander people.

Equally, the use of the terms 'Aboriginal' and/or 'Indigenous' are intended to be inclusive of all Aboriginal and Torres Strait Islander people throughout Australia.

The Aboriginal Health and Medical Research Council of NSW would like to acknowledge Ngwala Willumbong Co-operative Ltd for allowing the Koori Practice Checklist to be modified.

ABOUT THIS BOOKLET

Artwork by Christopher Edwards–Haines:

The paintings in this document reflect Christopher's interpretation of Aboriginal health. Christopher is a Kamilaroi man and was born in Tamworth NSW.

Text:

This resource was adapted from the *Koori Practice Checklist* by Ngwala Willumbong Co-operative Ltd.

Aboriginal Health and Medical Research Council of NSW, 2009

Design: ARMEDIA



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INTRODUCTION

Why the Aboriginal Practice Checklist has been developed

The Aboriginal Practice Checklist was developed to assist Magistrate's Early Referral Into Treatment (MERIT) program and Alcohol and other Drug services to consider a wide range of issues relating to improving access for Aboriginal clients.

The Aboriginal Practice Checklist provides a basic framework for management and staff to evaluate their agency's policies and practices in relation to Aboriginal clients and partner agencies. Specifically, it aims to:

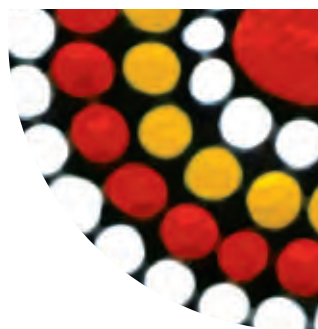
- Identify access barriers;
- Develop systemic solutions; and
- Identify innovative best practice models.

The Checklist also seeks to assist agencies in the identification of tasks and activities to address any identified problem areas.

It is hoped that this checklist will be of use for a variety of other services.

How the Aboriginal Practice Checklist was developed

The Aboriginal Practice Checklist was adapted from the 'Koori Practice Checklist', developed in 1999 by Ngwala Willumbong Co-operative Ltd. Several MERIT teams trialled the checklist – it has been endorsed by the Steering Committee for the project *Improving Aboriginal Participation in the MERIT program* and the Aboriginal Health and Medical Research Council of NSW.



How to use the Checklist

The Aboriginal Practice Checklist is made up of three parts:

- **Part A** – Operational Policies and Procedures comprising ten sections.
- **Part B** – Case Management Practice comprising seven sections.
- **Part C** – Best Practice Model for Aboriginal participation in the MERIT program.

Parts A and B pose a number of questions, which require a simple 'Yes' or 'No' response. Tasks or activities to address any issues, together with the name of the person responsible to oversee the activity and an expected completion date, can be recorded alongside.

Part C comprises six domains which together provide a framework for a culturally secure program.

Example:

PART A OPERATIONAL POLICIES AND PROCEDURES

Section 4 Physical Environment

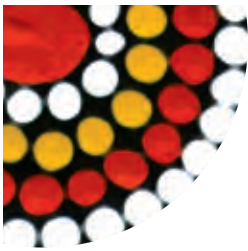
For each of the following statements, mark the box you think best reflects your agency's current situation. If you answer NO to any statement, please fill in boxes 1 to 3.

	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
There are appropriate physical images in the waiting area to help Aboriginal clients feel comfortable (e.g. Aboriginal posters/artwork and media)	☐	☒	Contact local Aboriginal Medical Service for advice.	Alice	24.10.09
			Obtain Koori posters/pamphlets.	Alice	14.11.09
			Display in main reception area.	Alice	24.11.09

Individual teams will need to determine for themselves the most appropriate internal processes for using the Aboriginal Practice Checklist. Irrespective of whether Part A should be undertaken by management and Part B as a team, or combinations of both, it is important that the self-assessment is an honest disclosure of the team's current situation for each question in each and every section.

Steps

Read through each checklist and answer 'yes' or 'no' to each question. You now have some guidelines for what you are doing well (your **yes** responses) and some goals for how you can improve (your **no** responses).



Prioritise your no responses

Choose three to five of your 'no' responses to work on in the next month. Write a plan of how and when you will achieve the tasks and activities you have chosen. You may want to include your plans in your work plan or strategic plan. Once you have achieved one of your goals, you can record your action as a new achievement and choose another goal from the remaining items on your list. Keep other people – including your management – informed of your progress and share good ideas and examples with your colleagues and your networks.

Getting started

Where possible, staff of mainstream agencies are encouraged to identify an Aboriginal community-controlled agency who they will work with to address any issues that are identified as requiring attention.

This process will also allow staff of both agencies to become familiar with each other and determine the changes which can be made to design services that are culturally appropriate to meeting the needs of Aboriginal clients.

The Aboriginal Practice Checklist is not the definitive process for ensuring sensitive approaches to the needs of Aboriginal people. The Aboriginal Practice Checklist simply serves as a guide and is one framework for examining issues that can then be addressed by agencies.

Many barriers facing Aboriginal people in accessing and feeling comfortable with mainstream services are created by administrative and case management procedures. These procedures can, inadvertently, become major deterrents for many Aboriginal people.

It is the hope of the Aboriginal Health and Medical Research Council of NSW that this cultural checklist will assist your agency in uncovering your service delivery barriers and that you will develop a commitment to change these.

An advisory tale:

During consultations with MERIT teams, the frustrations of mainstream workers were commonly heard in quotes such as:

"Aboriginal people don't engage."

"We don't get any/many Aboriginal referrals."

"We are a good agency and we don't understand why Aboriginal people don't use us. We have tried lots of things but it doesn't seem to make a difference. What can we do?"

A good analogy is that of shop owners wanting to keep their business viable. Shop owners do not simply blame their customers for a lack of patronage. Instead, they will ask themselves numerous questions about the business, examining issues such as trading hours, prices, appearance, stock, customer relations, marketing and signage. Essentially, they will do what it takes to make sure customers purchase their goods and continue to keep coming back.

On the flip side, as customers, we individually choose to shop at places that satisfy both our immediate and emotional needs. Sometimes, we are not conscious of these emotional needs – but they influence our decisions just the same.

We tend not to patronise places where we feel uncomfortable or unappreciated.

So, the question might shift from: "What's wrong with them?", to "what can we do better?".

PART A OPERATIONAL POLICIES AND PROCEDURES

Section 1 Organisational policies in relation to Aboriginal people

For each of the following statements, mark the box you think best reflects your agency's current situation. If you answer NO to any statement, please fill in boxes 1 to 3.

	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
Our Vision Statement has a statement about diversity which also refers to the provision of services to Aboriginal people	☐	☐			
Our organisation has a written policy addressing the provision of services to Aboriginal clients	☐	☐			
Our employment policy encourages the employment of people with a commitment to Aboriginal Health	☐	☐			
Our employment policy encourages the employment of Aboriginal people at all levels of the organisation	☐	☐			
Our staff regularly consult with representatives and staff from Aboriginal agencies	☐	☐			

Section 2 Information about Aboriginal people and services in your agency's catchment area

For each of the following statements, mark the box you think best reflects your agency's current situation. If you answer NO to any statement, please fill in boxes 1 to 3.

	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
Our agency has current demographic and socio-economic information about Aboriginal people in our catchment area which is used when planning and evaluating our service programs.	☐	☐			
Our agency has current information about local Aboriginal organisations and programs	☐	☐			
Our agency has current information about relevant state-wide Aboriginal organisations	☐	☐			

Section 3 Client and community consultation

For each of the following statements, mark the box you think best reflects your agency's current situation. If you answer NO to any statement, please fill in boxes 1 to 3.

	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
Consultation processes occurred with Aboriginal stakeholders.	☐	☐			
There are mechanisms in place to ensure we get feedback from Aboriginal clients	☐	☐			
Where feedback is provided, it is used to review service practices and our programs for Aboriginal clients	☐	☐			
Aboriginal clients are advised of their rights in relation to receiving a service from the MERIT program	☐	☐			
There is a complaint procedure in place that Aboriginal clients are informed of and understand	☐	☐			
Staff at our agency have a good working relationship with Aboriginal service providers in our region	☐	☐			

Section 4 Promoting services and health

For each of the following statements, mark the box you think best reflects your agency's current situation. If you answer NO to any statement, please fill in boxes 1 to 3.

	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
Our service is promoted to eligible people, stakeholders, partner agencies and Aboriginal communities. This includes program content, boundaries, potential benefits and clear information about who can access service and how	☐	☐			
Information about Aboriginal agencies, services and programs and health promotion materials are on display in our waiting areas	☐	☐			
Clear language is used in written and verbal information	☐	☐			

Section 5 A welcoming environment

For each of the following statements, mark the box you think best reflects your agency's current situation. If you answer NO to any statement, please fill in boxes 1 to 3.

	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
Our agency is visible from the street	☐	☐			
We assist clients to reach our service as appropriate.	☐	☐			
The design and atmosphere of reception is welcoming and includes displayed information appropriate to local Aboriginal communities	☐	☐			
Aboriginal clients and their families are made to feel welcome in the waiting area, (e.g. with posters, pamphlets, etc.)	☐	☐			
The service can be accessed by people with mobility problems and/or young families. (e.g. wheelchairs or prams)	☐	☐			
Some programs and workers can outreach and/or are based in community facilities, so Aboriginal clients with transport problems can access our service	☐	☐			

Section 6 Relevance of programs and services provided

For each of the following statements, mark the box you think best reflects your agency's current situation. If you answer NO to any statement, please fill in boxes 1 to 3.

	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
Program planning and delivery takes into account program relevance for Aboriginal people and the effect on health outcomes	☐	☐			
All programs offered to Aboriginal clients have been assessed as culturally appropriate. If not, clients are offered a separate program, (e.g. culturally specific therapeutic group or Aboriginal men's or women's groups, or sessions with an alternative practitioner)	☐	☐			
Our agency's procedure manual contains specific instructions and guidelines about the provision of services to Aboriginal people	☐	☐			
Our strategic and operational plans include specific allocation of resources for increasing accessibility for Aboriginal people	☐	☐			
Activities to assist clients to deal with grief, loss and trauma are incorporated into case management plans, as appropriate	☐	☐			

Section 7 Decision-making processes and collaboration

For each of the following statements, mark the box you think best reflects your agency's current situation. If you answer NO to any statement, please fill in boxes 1 to 3.

	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
Regular consultation and collaboration takes place between our agency and representatives from local Aboriginal agencies in the provision and delivery of services and programs	☐	☐			
Regular consultation with local Aboriginal representatives/agencies is encouraged and conducted in a culturally appropriate manner (i.e. time, place and process)	☐	☐			

Section 8 Staff attitudes questionnaire in relation to Aboriginal people

For each of the following statements, mark the box that best reflects how many workers in your agency would agree with the statements.

	1. ALL workers	2. MOST workers	3. SOME workers	4. NO workers
Staff in our agency can provide a culturally appropriate service for Aboriginal clients and significant others, as they have experience, knowledge and skills to work effectively with Aboriginal people	☐	☐	☐	☐
It is our agency's responsibility to overcome any cultural barriers when delivering a service to Aboriginal people	☐	☐	☐	☐
The involvement of Aboriginal people in our agency contributes to the quality of service delivery	☐	☐	☐	☐
Anyone can use this service if they want to – it's their decision	☐	☐	☐	☐

If you marked any of the boxes under columns 2, 3 or 4, please indicate what action your agency will take to ensure that staff are aware of the needs of Aboriginal people who use your service.

TASK/ACTIVITY	WHO	BY WHEN

Section 9 Diversity work strengths in relation to Aboriginal clients

For each of the following statements, mark the box you think best reflects your agency's current situation. If you answer NO to any statement, please fill in boxes 1 to 3.

	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
Staff demonstrate interpersonal skills (e.g. voice, appropriate body language and respect) when working with Aboriginal clients	☐	☐			
Staff have demonstrated knowledge and understanding of Aboriginal cultural values, beliefs and history	☐	☐			
Staff challenge racist comments, behaviour and assumptions at your service	☐	☐			
Staff know which Aboriginal agencies to refer Aboriginal clients to, if clients so wish	☐	☐			
Staff support Aboriginal clients to access appropriate services	☐	☐			
Staff demonstrate awareness of the strategies required to improve access to our services by Aboriginal people	☐	☐			
Our service promotes and participates in days of significance for Aboriginal people	☐	☐			
We acknowledge the traditional custodians of the land at important events	☐	☐			

Section 10 Training and development of staff

For each of the following statements, mark the box you think best reflects your agency's current situation.
If you answer NO to any statement, please fill in boxes 1 to 3.

	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
The staff orientation package includes a component about Aboriginal culture, beliefs, values and history	☐	☐			
All staff demonstrate principles of cross-cultural communication as it relates to the provision of services and programs to Aboriginal people	☐	☐			
Staff have access to appropriate information (both theory and practical) on cultural differences and the past and present experiences of Aboriginal people	☐	☐			
Staff are informed about the strategies to improve access for disadvantaged groups, including Aboriginal people	☐	☐			
Ongoing professional development programs or opportunities with Aboriginal staff or agencies are available to staff to enable them to respond effectively to the needs of Aboriginal people	☐	☐			
There is a process in place to monitor and evaluate staff performance when working with Aboriginal people	☐	☐			

PART B INTAKE AND CASE MANAGEMENT PROCEDURES

Practice Issue 1 Case management practices

Documentation and worker practices are in place which support planning, monitoring and review processes for Aboriginal clients.

PRACTICE INDICATORS	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
There is a documented process for client involvement in the development, monitoring and review of their case plan and services provided to the client	☐	☐			
Case manager roles and responsibilities for the monitoring and review process are clearly defined	☐	☐			
Clients routinely receive a copy of their individual case plan	☐	☐			

Practice Issue 2 Strategies for service delivery

Strategies are in place for ensuring culturally appropriate service delivery for Aboriginal clients.

PRACTICE INDICATORS	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
There are documented processes in place for ensuring sensitive entry assessment when Aboriginal clients use our service	☐	☐			
Assessment tools include questions focusing on an Aboriginal client's service needs beyond the scope and duration of the MERIT program	☐	☐			
Workers actively focus on cultural requirements, including those of Aboriginal families	☐	☐			

Practice Issue 3 Linkages, networks, protocols and service liaison mechanisms

Linkages, networks, protocols and service liaison mechanisms with Aboriginal agencies are in place.

PRACTICE INDICATORS	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
Our service works in partnership with Aboriginal organisations or workers to make our service accessible	☐	☐			
We provide information about our service to Aboriginal organisations	☐	☐			
With client consent, case managers routinely involve relevant Aboriginal workers or agencies in developing and/or implementing case plans of Aboriginal clients	☐	☐			

Practice Issue 4 Accessibility strategies

Strategies are in place to ensure the service is accessible to Aboriginal clients.

PRACTICE INDICATORS	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
Aboriginal people contacting our agency are informed about the agency, its range of services and its linkages with Aboriginal workers or agencies	☐	☐			
There is written material specifically describing our agency and the services it offers	☐	☐			
The agency's facilities are appropriate for the needs of Aboriginal clients	☐	☐			
A key worker or team of culturally qualified intake workers are responsible for suitability screening and assessment of Aboriginal clients	☐	☐			
The agency assesses access barriers for each client and develops strategies to overcome them (i.e. outreach, community support person, housing)	☐	☐			

Practice Issue 5 Organisational supports and procedures

Organisational supports and procedures to respond to the needs of Aboriginal clients (such as peer support, case supervision, debriefing, critical incident reporting and responding, communication and decision-making forums.)

PRACTICE INDICATORS	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
The agency has formalised processes for staff to learn from each other and external supervisors about issues relating to Aboriginal clients	☐	☐			
The agency has formalised processes for case-managing Aboriginal clients with an option of the involvement of Aboriginal workers	☐	☐			
The culture of the agency encourages staff to learn from their practices, including those relating to Aboriginal clients	☐	☐			
The culture of the agency actively encourages staff to include Aboriginal clients in problem-solving	☐	☐			
There are protocols for debriefing and supporting staff following critical incidents with Aboriginal clients	☐	☐			
Workers clearly understand the boundaries of their relationships with Aboriginal clients and their role responsibilities, especially in dealing with critical situations	☐	☐			

Practice Issue 6 Assessment processes

Assessment processes and a recognised practice for identifying the needs of Aboriginal clients are in place.

PRACTICE INDICATORS	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
All clients are asked if they are Aboriginal or Torres Strait Islander	☐	☐			
All workers have been educated or are experienced in assessing diversity within a client's background and the specific needs of Aboriginal clients	☐	☐			
Client's health needs and risks are routinely discussed during the assessment process (e.g. housing, family and social support, sexual health, mental health, hepatitis C, gambling)	☐	☐			
Feedback on the appropriateness of the assessment process is sought from clients	☐	☐			
With client agreement, Aboriginal and other agencies who have current involvement with the client are contacted and their comments sought	☐	☐			

Practice Issue 7 Strategies for mandatory reporting, procedures and practice

Policy, procedure and practice for mandatory reporting.

PRACTICE INDICATORS	YES	NO	1. TASK/ACTIVITY	2. WHO	3. BY WHEN
All staff are aware of NSW Health child protection reporting requirements policy and reporting procedures	☐	☐			
All female clients are screened for domestic violence and all staff are aware of the procedures to support clients	☐	☐			
The agency maintains a comprehensive resource guide to services for Aboriginal women and children for referral purposes	☐	☐			

PART C BEST PRACTICE MODEL OF ABORIGINAL PARTICIPATION IN THE MERIT PROGRAM

1. Reorient service to be inclusive of Aboriginal clients

- Provide staff training and skills development in working cross culturally
- Ensure a culturally secure service by involvement of Aboriginal workers, services and community in program planning and delivery
- Identify staff characteristics (attitude, knowledge and skills) towards providing a culturally secure environment
- Encourage a service commitment to improve Aboriginal participation and outcomes
- Ensure policies and procedures are inclusive of Aboriginal people's needs, and that strategies are implemented
- Select a staff member to take responsibility for all aspects of Aboriginal participation and partnerships

2. Identify and reduce barriers for clients

- Identify acceptability of service for Aboriginal clients
- Ensure service has adequate staff and resources to ensure Aboriginal people's participation and retention on the program
- Prioritise and implement service changes to reduce barriers
- Advocate for flexibility with eligibility and assessment,
- Identify and minimise client specific barriers, which could include;
- Primary drug concern
- Social and emotional wellbeing (mental health)
- Motivation to participate in treatment
- Homelessness and suitable accommodation
- Access to transport
- Access to phone and credit
- Family and social support

3. Develop or strengthen relationships with Aboriginal health workers and community agencies

- Arrange consultancy or supervision by an appropriate Aboriginal Health Worker
- Develop referral pathways to Aboriginal specific Alcohol & other Drug services or workers, where available
- Develop quality referral pathways to Aboriginal Community Controlled Health services and other Aboriginal community based agencies
- Invite consultation and feedback on services from local Aboriginal community and services

4. Ensure program is effective and meets needs of Aboriginal people

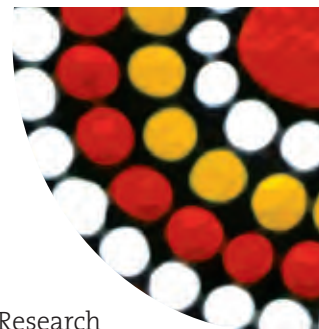
- Ensure programs and intervention techniques are effective in attracting and retaining clients on the program. Evaluate psychosocial outcomes of Aboriginal clients and ensure processes to seek feedback from clients, family and partner agencies
- Ensure assessment, program delivery and structure are appropriate for Aboriginal clients (see program framework model Figure 4)
- Ensure culturally appropriate therapies and emphasis on Aboriginal culture and values
- Ensure program content and delivery is developmentally appropriate
- Involve family and community where appropriate. Assist in establishing and strengthening relationships with significant others, mentors and role models
- Evaluate program content and delivery and make changes as necessary

5. Promote service to eligible people and Aboriginal communities

- Raise awareness of program within the local Aboriginal community, through interagency meetings, participation in community events, developing Aboriginal specific resources, approaching Aboriginal organisations and communities.
- Work with court users to encourage program support and feedback, particularly Magistrates, solicitors and Aboriginal Client Service Specialists and Aboriginal Community Justice Groups

Further information

Here is a sample of the range of resources available to support your service's engagement with Aboriginal clients.



Online resources

A guide to working with Aboriginal clients on MERIT, Aboriginal Health and Medical Research Council of NSW, 2008: www.ahmrc.org.au

Introduction to Aboriginal culture: www.dreamtime.net.au

Communicating positively – A guide to appropriate Aboriginal terminology and the Welcome to Country Protocols: www.health.nsw.gov.au/pubs/2004/pdf/ab_terminology.pdf

Bringing together Aboriginal organisations, research institutions and government agencies to deliver health-related programs and information to Aboriginal people, Cooperative Research Centre for Aboriginal Health: www.crcah.org.au/

Beyond Band aids: Exploring the Underlying Social Determinants of Aboriginal Health, Cooperative Research Centre for Aboriginal Health: www.crcah.org.au/publications/beyond_band_aids.html

Cultural competency: www11.georgetown.edu/research/gucchd/nccc/about.html

First Australians chronicles the birth of contemporary Australia from the perspective of its first peoples.

All seven episodes are available to watch online: <http://www.sbs.com.au/firstaustralians>

It is also available to purchase on DVD and as an extensively illustrated book.

Hard copy resources

Binan Goonj: Bridging cultures in Aboriginal health, A–K. Eckermann, T. Dowd, E. Chong, L. Nixon, R. Gray, S. Johnson. 2005.

Bringing Them Home Report. Report of the National Inquiry into the Separation of Aboriginal and Torres Strait Islander Children from their Families, Human Rights and Equal Opportunity Commission, 1997.

Survival: A History of Aboriginal Life in New South Wales, N. Parbury, Ministry of Aboriginal Affairs NSW, 1986.

First Australians: An Illustrated History, Rachel Perkins, Louis Nowra, MacMillan, 2008.

Aboriginal primary health care: An evidence-based approach, Sophia Couzos, Richard Murray, Third ed., Oxford University Press, 2008.

ABORIGINAL PRACTICE CHECKLIST

A CULTURAL ASSESSMENT TOOL FOR **MERIT** TEAMS

This checklist focuses on the particular needs of Aboriginal people accessing mainstream organisations.

It provides a basic framework for management and staff to evaluate their agency's policies and practices in relation to Aboriginal clients and partner agencies.



ABORIGINAL HEALTH & MEDICAL RESEARCH COUNCIL