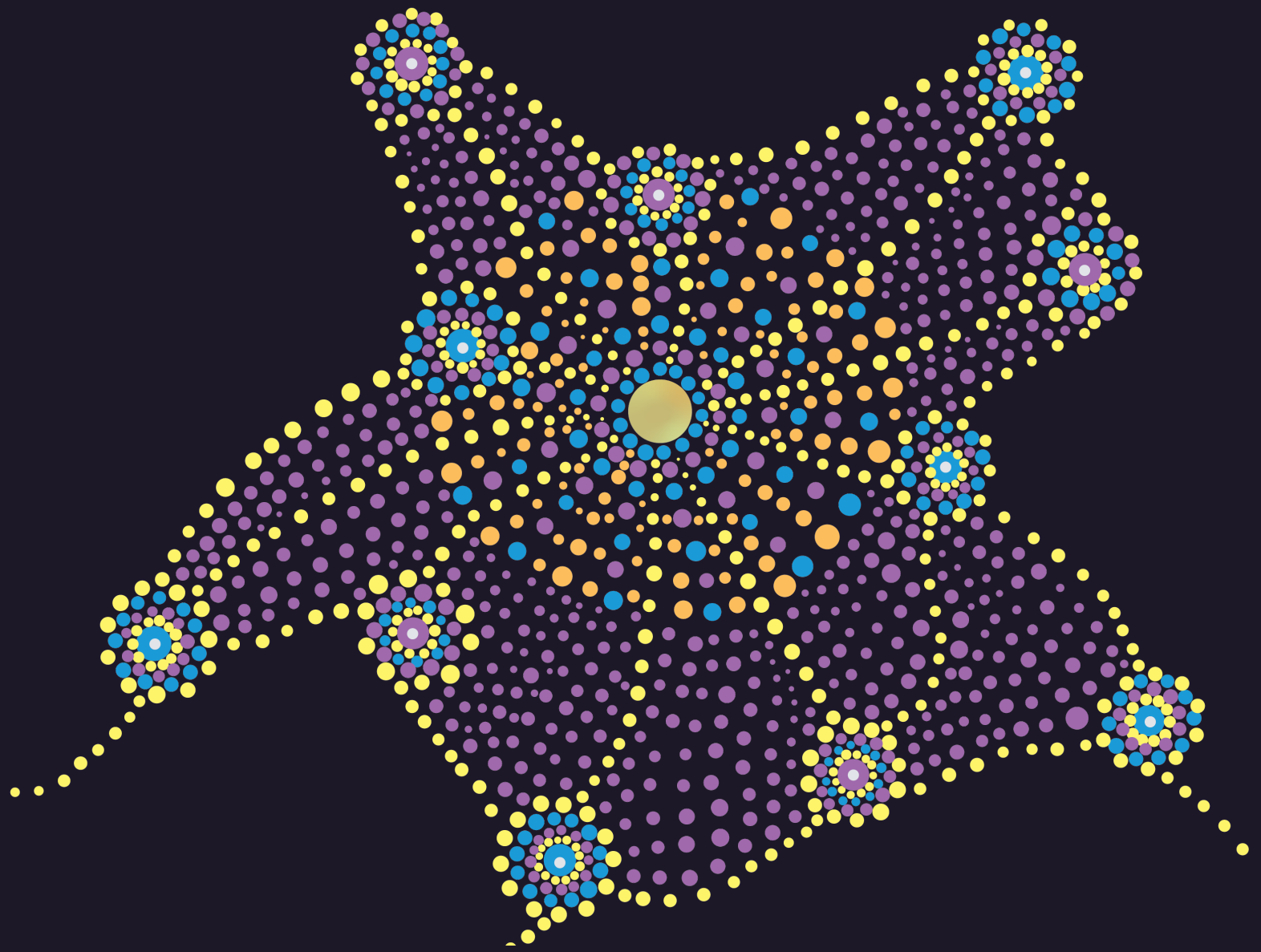
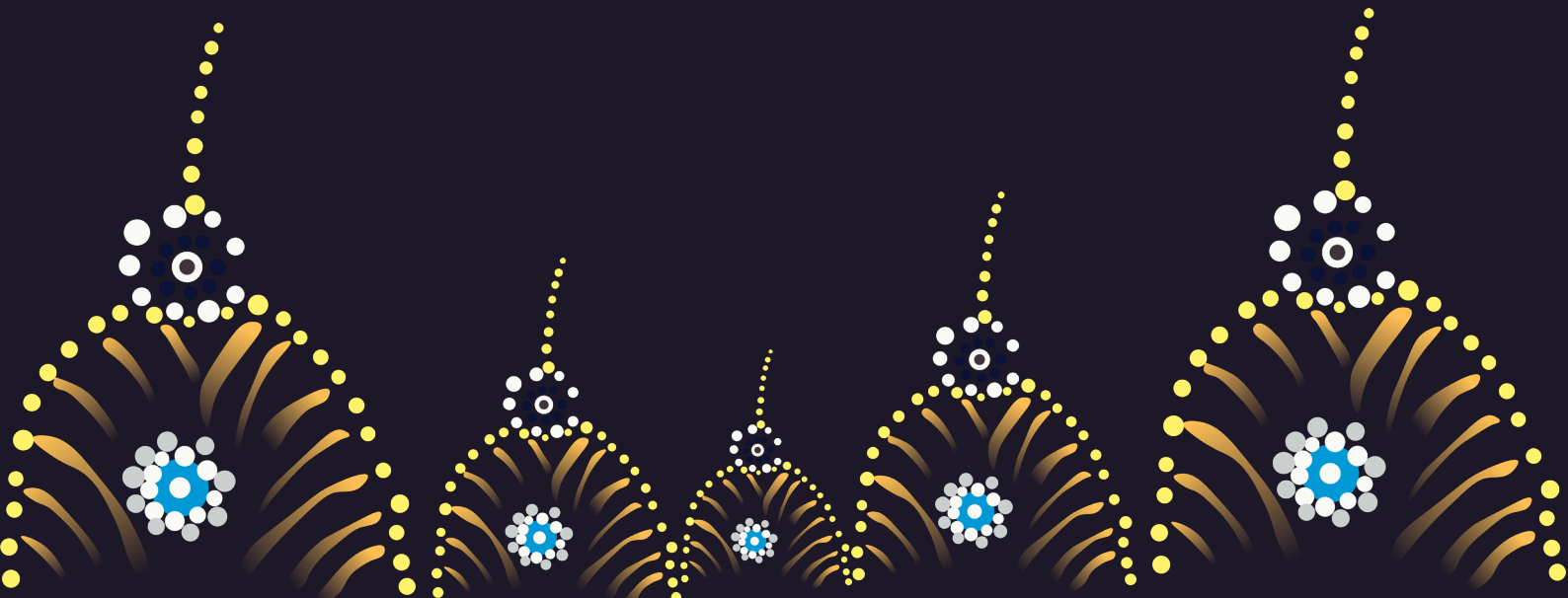
ST VINCENT'S HEALTH NETWORK
SYDNEY

Dalarinji



St Vincent's Health Network Sydney

Aboriginal Health Plan FY 2026-2028



Dalarinji

OURS BELONGING TO US

The Dalarinji artwork, titled "***Ours Belonging to Us***," was created by Aboriginal artist Lani Balzin for St Vincent's Health Network Sydney (SVHNS). This artwork serves as the visual identity for Aboriginal Health across our Network, and is proudly displayed on staff uniforms and scrubs, mobile health clinics, and around our hospital.

It is featured throughout SVHNS' Aboriginal Health Plan FY 2026-2028, showcasing the embedded nature of this ongoing identity.

About the artwork

The middle dot in the middle represents the hospital and the dots moving away from the hospital represent healing and health. The individual dots around the outside are indicators of the different walks of people and the different types of health professionals, all working together to form a united front for Indigenous health.

The dotted circles symbolise people gathering, whereas the dots all around the paint represent the network of people. The five outer groups of dots represent the five Sisters of Charity who founded the hospital in 1857. From there, the dots move towards the hospital, symbolising the growth of the hospital over time.

The artwork as a whole illustrates the collaborative efforts to improve health outcomes for Indigenous communities, which remains a key priority and commitment of St Vincent's.

Acknowledgement of Country

St Vincent's Health Network, Sydney (SVHNS) acknowledges the Traditional Owners of the land in which we provide care, the Gadigal and Bidjigal people of the Eora Nation, whose cultures and customs have nurtured and continue to nurture the land since men and women awoke from the great dream.

We honour the presence of these Ancestors who reside in the imagination of this land and whose irrepressible spirituality flows through creation.

We pay respects to Elders past and present as we walk and work together on the journey of improving Aboriginal and Torres Strait Islander health outcomes.

Statement of commitment

Travelling ancient spirits from the Dreaming, mould and craft the landscape, forging rivers, mountains and valleys.

Whispers of an ancient voice, sweep across the plains, advising us to tread softly.

The earth beneath the soles of our feet, soft like the cushioned steps of our mammals, all deserving of tender care.

In harmony, Aboriginal people coexisted, dancing with nature in equilibrium and health, taking only what was needed.

For eons, we weave ourselves into this sacred soil, a vital link with our bodies, health, communities and song lines, a mirror reflecting our way of life.

The balance has tipped, we walk into a path of destruction, defying ancestral wisdom, looking away, deaf to the scars and cries of the land.

Climate change rears its head, floods and fires scorch and dampen, as heat takes control, our people's health bears the burden.

Omnipotent yet vulnerable, she cries out in pain, craving nurture and progress toward restoration, a plea for healing care.

Gratitude is owed for her boundless gifts,
a commitment is needed to reconnect, restore, for the health of current and future generations.

We pledge to stand together,
Guardians of this scared ground,
Always was, always will be, Aboriginal land

Written by Matthew Shields and Annika Bowen

Foreword

Anna McFadgen

SVHNS Chief Executive

As a purpose-driven organisation, we recognise our unique role in addressing the health disparities that continue to affect Aboriginal people and communities.

The inequities faced by Aboriginal people are a reflection of deep-seated systemic challenges. We understand that colonisation, including dispossession of land, cultural loss and intergenerational trauma, has had a lasting impact on the social determinants of health.

We also acknowledge that racial discrimination and systemic biases within healthcare have contributed to unequal treatment and poorer outcomes for Aboriginal people.

St Vincent's is steadfast in its commitment to reconciliation and health equity. By embedding culturally safe practices, strengthening partnerships with Aboriginal communities, and ensuring Aboriginal voices are at the heart of our strategic direction, we continue to take meaningful steps towards advancing Aboriginal health in NSW.

We recognise that there is still much work to be done, and that achieving true health equity requires a sustained, collective effort built on trust, shared decision-making, and culturally responsive care.

Aligned with our strategic priorities and our Values, we have a responsibility to provide a health service where every Aboriginal person receives the care and respect they deserve. This three-year plan outlines our key priorities in delivering high-quality, culturally appropriate healthcare, fostering deeper community engagement, and strengthening collaboration with Aboriginal health organisations.

Through prioritising these initiatives, we aim to provide better, fairer, and more inclusive healthcare.

Anna McFadgen
Chief Executive Officer
St Vincent's Health Network Sydney

A Quick Yarn with Pauline Deweerd

Executive Director, Aboriginal Health

I welcome you to the SVHNS Aboriginal Health Plan FY 2026 – 2028.

We have had a few big years in the space of Aboriginal Health & Employment and continue to drive and commit to the NSW and SVHN Aboriginal Health Plans through:

- Growing and supporting Aboriginal Health workforce
- Providing holistic, integrated and person-centre care
- Enhancing health promotion, prevention and early intervention
- Addressing the social, cultural, economic, political, commercial and planetary determinations of health
- Strengthening monitoring, evaluation, research and knowledge translation

Through this Plan you will see some of our priorities to address these strategies through our operational business plans and our commitment to our True North priorities.

We travelled far and wide to consult, we listened and heard what Aboriginal communities' health and employment needs are. We heard first-hand on what we need to change to build a better health service for Aboriginal people, we will ensure that all Aboriginal people that come into our care or organisation will be treated with respect and delivered with culturally safe care.

We have increased our Aboriginal workforce and placed positions where the need is. We have seen our Aboriginal staff take on further education, training and development.

We know that we could do better in attracting and improve on our retention rates across our organisation. We are working on this through our People & Culture teams by developing better communication and resources to promote our Network.

We are fully committed to celebrating with both non-Aboriginal and Aboriginal staff and communities through our National Reconciliation week and NAIDOC; as well as promoting successful programs, projects and research that are contributing to closing the gap and acknowledge and remember National Sorry Day every year.

We have high percentage of our staff completing the Respecting the Difference training, both online and face to face. We are truly committed to ensure Aboriginal businesses are part of our procurement process.

We have made the Emergency Department a more flexible environment for Aboriginal patients to complete treatment. In 2024 we signed an agreement with the Sydney Metropolitan Local Aboriginal Partnership Agreement with Redfern Aboriginal Medical Service, South Eastern Sydney Local Health District, Sydney Local Health District, North Sydney Local Health District and Specialist Children's Hospital Network and identified together a collaborate approach to improving health and workforce outcomes to the Aboriginal communities we serve.

Pauline Deweerd
Executive Director Aboriginal Heath
St Vincent's Health Network Sydney

Executive Summary

The SVHNS Aboriginal Health Plan (FY 2026-28) outlines SVHNS's vision to create an environment where Aboriginal people, patients, staff and visitors thrive in health and well-being, empowered by a culturally safe environment and holistic healthcare that honors and respects their identity, wisdom, and resilience.

The Plan reaffirms St Vincent's unwavering commitment to improving health outcomes and experiences of Aboriginal people, understanding the importance of culturally safe care and research practices. It emphasises the critical role our workforce plays in achieving this, and the importance of creating meaningful employment opportunities for Aboriginal staff across all areas and levels of the organisation.

It acknowledges the crucial role of every individual in shifting the dial on health outcomes for Aboriginal people, both within our care and in the broader community, while setting the stage for targeted action over the next three years.

Our plan aligns with the vision outlined in the NSW Aboriginal Health Plan 2024-2034, which we proudly share as we strive for a better future.

NSW's Aboriginal Health Plan 2024-2034

The NSW Aboriginal Health Plan 2024-2034 was launched in September 2024 to drive change to achieve the highest possible levels of health and wellbeing for Aboriginal people in NSW, by:

Overview of the NSW Aboriginal Health Plan

- Guiding how health systems are planned, delivered and monitored
- Elevating the focus on Aboriginal expertise to drive shared decision-making and innovative collaborations
- Influencing the redesign of health services to achieve health equity, and
- Providing direction for the elimination of racism in all aspects of health care.

The NSW Aboriginal Health Plan recognises that system reform is essential to ensure Aboriginal people can access an equitable and culturally safe health system, and experience health and wellbeing outcomes at the highest possible level. Centred in a vision of sharing power in system reform, it seeks to recognise current power differentials and the dedicated steps required to address them. This acknowledges that sharing power means sharing decision making, ensuring the voices of Aboriginal people hold as much weight as governments.

Five core Priority Reform Areas guide the plan as cross cutting enablers of change for cultural and systemic transformation across the health system, while the Strategic Directions articulated within allow for strategic and tactical focus that will enable core business to be done differently moving forward.

St Vincent's Health Network, Sydney Plan

SVHNS's Aboriginal Health Plan is aligned with the Priority Focus Areas, Strategic Directions and commitments to ways of working, and will seek to drive meaningful change through the local implementation of the NSW Aboriginal Health Plan.

SVHNS has adopted a comparable format, reflecting its commitments under each Strategic Direction which have been shaped and informed by our own consultations and local community needs.

This approach will form the foundation for our **annual business planning cycle**, where priorities will be translated into specific deliverables for each year. Forming part of our existing reporting and monitoring framework, this robust approach will ensure our progress is monitored, our impact is measured, and that our actions are working toward achieving our objectives.

These check-ins will allow for real-time adjustments and continuous improvement, ensuring that our actions are responsive to both evolving needs and the broader vision of improving health outcomes within our community.

St Vincent's Health Australia

St Vincent's Health Australia (SVHA) is Australia's largest not-for-profit health care provider and Australia's largest social enterprise, operating two major inner city health networks in Melbourne and Sydney, including 10 private hospitals, 26 aged care facilities and a range of virtual and home care services across three states.

We are proudly one of Australia's most highly regarded healthcare institutions, providing world leading care driven by a rich history of pioneering medical advancements.

Our promise is to provide better and fairer care, always. It's the bar we set ourselves to make sure we are always delivering the care that Australians need.

ST VINCENT'S
Better and fairer care. Always.

St Vincent's Strategy 2030

MISSION

Our mission is to **express God's love to those in need** through the healing ministry of Jesus.

VALUES

We deliver **person-centred care**, inspired by the Sisters of Charity, and underpinned by our values:

- COMPASSION
- EXCELLENCE
- INTEGRITY
- JUSTICE

We are especially committed to people who are poor or vulnerable.

Better and fairer care. Always.

VISION

Every person, whoever and wherever they are, is served with excellent and compassionate care, by a better and fairer health and aged care system.

We will make unique contributions towards our vision in key arenas:

- HEALTH EQUITY
- CHRONIC CARE PLATFORMS
- HEALTHY AGEING
- VIRTUAL AND AT-HOME CARE
- RESEARCH AND INNOVATION
- HEALTH LEADERSHIP

PRIORITIES

ENHANCE OUR IMPACT

Continuously improve our care, enhancing positive impacts for our patients, people and planet.

- Enhance the safety, quality, experience, and equity of our care for patients and residents.
- Enhance safety, wellbeing and experience for our people
- Ensure sustainable funding, value and growth.
- Reduce environmental impact.

CONNECT CARE

Work together, building 'One St Vincent's' capabilities and services to create the future of connected health and aged care.

- Enhance leadership, culture and capability.
- Accelerate connected care innovation, supported by digitalisation and hospitals as hubs.
- Enhance research translation, partnerships and precincts.
- Build future-focused clinician and carer education and training pathways.

TRANSFORM THE SYSTEM

Work with partners to shape a better and fairer health and aged care system.

- Lead system-wide solutions addressing equity, access and outcomes for priority populations.
- Embed First Nations' voices and the principles of reconciliation.
- Engage community in the future of health and aged care.
- Build long-term partnerships for a better and fairer health system.

Stretch Reconciliation Action Plan
(February 2025 – February 2028)

The SVHNS Aboriginal Health Plan aligns closely with SVHA's national Reconciliation Action Plan (RAP), which sets the overarching direction for reconciliation across all SVHA entities. At St Vincent's our vision is that every Aboriginal and Torres Strait Islander person, whoever and wherever they are, is served with excellent and compassionate care, and by a better and fairer health and aged care system.

St Vincent's RAP is committed to making unique contributions towards this vision across three key areas/ domains:

- **Clinical:** Enhanced clinical and wellness outcomes
- **Employment:** Improved recruitment, retention and development for team members
- **Education:** Delivery of education prioritising the important of cultural safety that translates to better care outcomes

The SVHNS Aboriginal Health Plan and the national RAP are closely associated and work alongside each other to support a unified approach to reconciliation. While the RAP focuses on system transformation instead of defining system-wide priorities, the Aboriginal Health Plan aligns with it through locally tailored actions that respond to the specific needs of our stakeholders, communities and services. Together, they strengthen our role in progressing reconciliation, our commitment to compassion and advocate for justice, particularly for those experiencing health inequity.

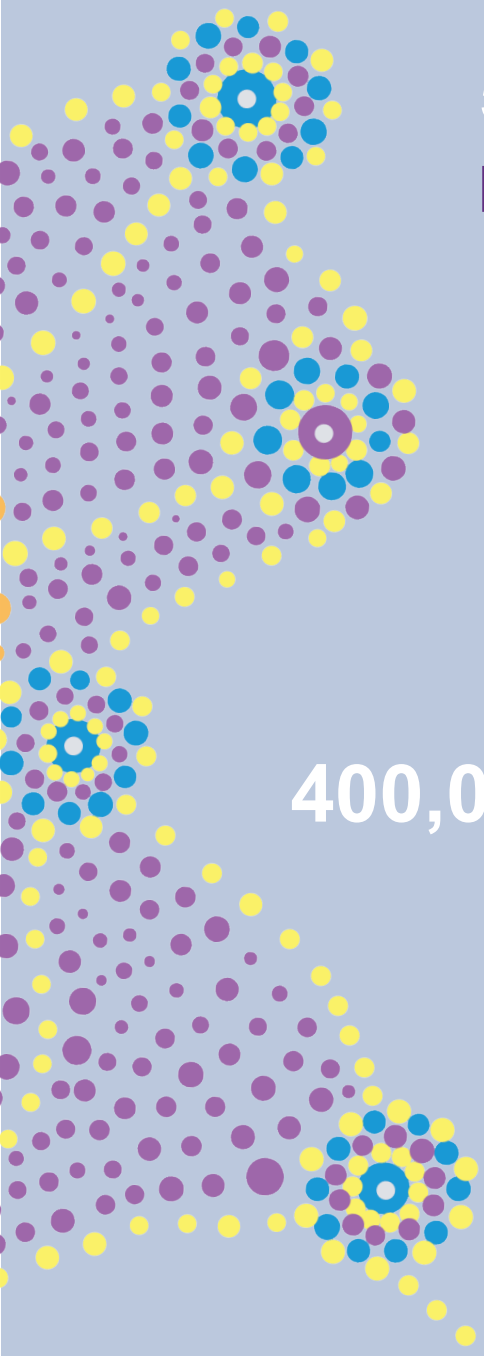
There is strong alignment in the shared focus on improving health outcomes for Aboriginal and Torres Strait Islander peoples. A core connection lies in supporting the delivery of holistic, integrated, person-centred and culturally safe care. Both documents prioritise workforce development, culturally safe models of care, and meaningful actions opposing on anti-discrimination and racism as critical enablers of change. This alignment advances Closing the Gap efforts, enhances clinical outcomes, and ensures care is delivered in a way that is respectful, inclusive, and culturally informed. Together, the Aboriginal Health Plan and the RAP guide a united, approach to reconciliation and equity.

St Vincent's Health Network Sydney

Founded in 1857 by the Sisters of Charity with an unwavering commitment to serving those in need, St Vincent's Public Hospital Sydney now alongside Sacred Heart Health Service and St Vincent's Correctional Health (SVCH)[1] form what is known today as St Vincent's Health Network Sydney.

We operate as a teaching and Principal Referral hospital in the inner city of Darlinghurst, providing public tertiary and quaternary healthcare services including an adult emergency department, trauma service, and a comprehensive spectrum of medical and surgical services through to sub-acute and community care.

Each year, we see approximately:



50,000 Emergency Department presentations each year

More than **40,000** inpatient admissions for patients from all over Australia

400,000 Outpatient service events

Deliver **2.5%** of the state's activity

[1]Note: SVCH will transition to Justice Health in Oct 2026, but at the time of launching the plan Parklea Correctional Centre's health service was being delivered by SVCH.

SVHNS reach and impact extends well beyond its physical location, with patients from across the country and around the world receiving world class care on our Precinct.

Beyond acute inpatient care, SVHNS has been instrumental in developing community-based health initiatives that focus on preventative care, early intervention, and support for the most vulnerable. Whether through mobile clinics, assertive outreach teams, or collaborations with local agencies - St Vincent's remains committed to delivering equitable healthcare within the community, for the community.

St Vincent's Aboriginal Population

SVHNS local area comprises the Eora and Dharawal Nations, encompassing the traditional lands of three Aboriginal language groups, including the Dharawal, Gadigal, and Bidjigal people.

There are over **3,400** Aboriginal people living within SVHNS's local area across 3 LGAs

Sydney LGA: **3009** Aboriginal persons **1.4%**[2]

Waverley LGA **279** Aboriginal persons **0.4 %**

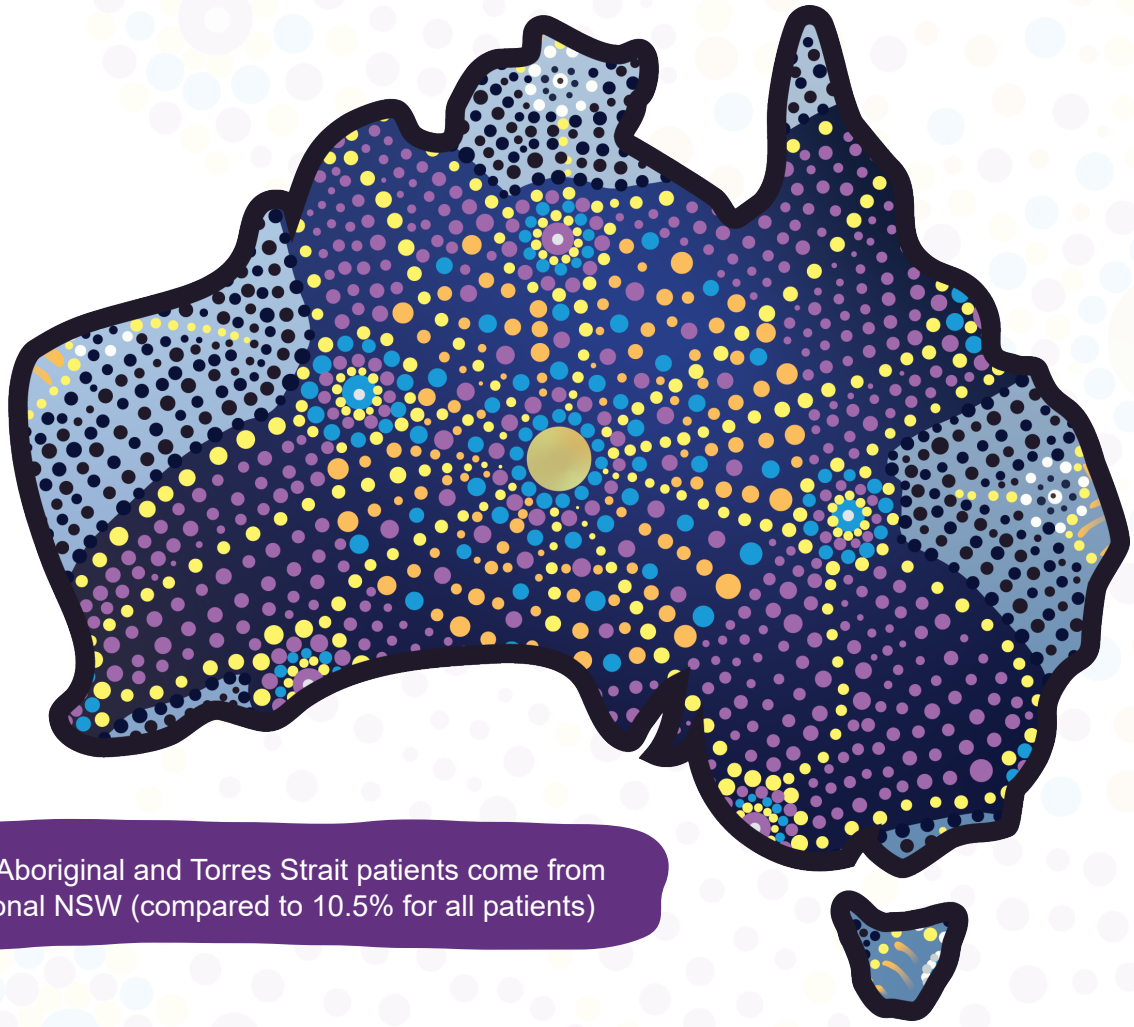
Woollahra LGA **176** Aboriginal persons **0.3%**

[2]Source: 2021 Australian Bureau of Statistics

As St Vincent's does not have a geographic catchment, we care for Aboriginal and Torres Straight people from all over Australia, which means our patients flow from many different regions and traditional lands. Our patient flows reflect the importance of connected and holistic care, given the additional pressures and burdens experienced by patients when travelling long distances to receive care away from home.

3.4% of Aboriginal and Torres Strait Islander patients come from interstate or overseas (compared to 3.6% of all patients)

71% for Aboriginal and Torres Strait patients come from the greater Sydney metropolitan region (compared to 84.8% for all patients)



18.8% for Aboriginal and Torres Strait patients come from rural or regional NSW (compared to 10.5% for all patients)

6.6% for Aboriginal and Torres Strait patients come from an undefined location* (compared to 1.1% for all patients)

'*St Vincent's serves a significant number of people whose residence is 'undefined', largely comprising those experiencing homelessness. The proportion of patients with an unknown residence is significantly higher in certain specialty areas, including mental health and alcohol and drug services.

Utilisation of our health services by Aboriginal People

In 2024, SVHNS had a total of 56,326 emergency presentations with Aboriginal and Torres Strait Islander people accounting for 5.93% (3342 presentations)

In 2024, the leading causes of hospitalisation (admission) for Aboriginal people at SVHNS were for kidney disease (Nephrology), Alcohol and Drug support, Surgical reasons and Psychiatric care (Mental Health)

In 2024, 10.5% of patients identifying as Aboriginal and Torres Strait Islander left the emergency department - 'did not wait', compared to 6.9% of the non-Aboriginal populations.

In 2024, 12.8% of Aboriginal patients had unplanned return visits to the emergency department within 48 hours, compared to 5.2% for all unplanned return visits.

In 2024, SVHNS had a total of 46099 hospital admissions with Aboriginal and Torres Strait Islander people accounting for 3.5% (1615 admissions).

In 2024, the average length of stay for patients identifying as Aboriginal or Torres Strait Islander was:
- Acute: 4.6 days (compared to 3.6 for non-Aboriginal population)

In 2024, 8.0% of admitted patients identifying as Aboriginal or Torres Strait Islander discharged themselves from hospital before completion of treatment, compared to 1.3% in the non-Aboriginal population.

In 2024, unplanned readmission rates for Aboriginal people were 11%, compared to 4.9% for all unplanned readmissions.

Introduction

The health disparities faced by Aboriginal communities in New South Wales (NSW) are a critical public health issue, reflecting deep-seated and systemic inequities. Aboriginal people experience notably poorer health outcomes compared to their non-Indigenous counterparts. This disparity is evident across a range of health indicators. For instance, the life expectancy of Aboriginal people is significantly lower than that of non-Indigenous people. According to the Australian Institute of Health and Welfare (2023), in 2021, the life expectancy for Aboriginal and Torres Strait Islander people was approximately 71.6 years for males and 75.6 years for females, compared to 80.5 years for non-Indigenous males and 84.4 years for non-Indigenous females.

Chronic diseases such as diabetes, cardiovascular conditions, and respiratory diseases also disproportionately affect Aboriginal communities. The prevalence of diabetes among Indigenous Australians is roughly three times higher than that of non-Indigenous Australians. Furthermore, Aboriginal Australians experience higher rates of preventable hospitalisations and premature deaths, underlining significant gaps in health outcomes and access to appropriate care.

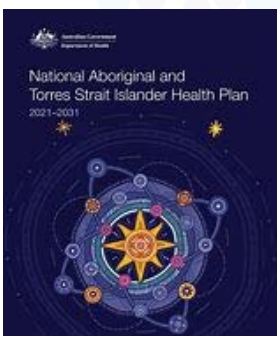
The root causes of these health inequities are multifaceted and deeply intertwined with historical and systemic factors. The legacy of colonisation, including dispossession of land, cultural disruption, and historical trauma, has had enduring effects on the social determinants of health for Aboriginal people. Socioeconomic disadvantages, such as lower income levels, reduced educational attainment, and poorer housing conditions, further exacerbate these health disparities. Discrimination and systemic biases within healthcare services also contribute to unequal treatment and outcomes for Aboriginal patients.

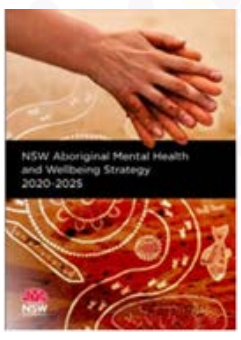
Addressing these health disparities requires a coordinated approach involving both governmental and non-governmental organisations. St Vincent's plays a pivotal role in this context. In line with its commitment to provide high-quality, patient-centred care, SVHNS has implemented a range of programs and initiatives aimed at improving health outcomes for Aboriginal people. These include culturally sensitive healthcare services, community engagement strategies, and collaborative partnerships with Aboriginal health organisations.

St Vincent's efforts are embodied in this Plan, informed by an extensive stakeholder consultation and engagement processes. External stakeholder engagement was also conducted through workshops and yarning circles, which provided valuable insights and feedback. This inclusive approach has significantly shaped the objectives and commitments outlined in our plan.

The plan aligns with a range of strategic frameworks and policies aimed at addressing health inequities.

These include:





Partnerships and Outreach

The Sydney Metropolitan Local Aboriginal Health Partnership:

The Sydney Metropolitan Local Aboriginal Health Partnership is a formal alliance between the Redfern Aboriginal Medical Service, Sydney Local Health District, Northern Sydney Local Health District, South Eastern Sydney Local Health District, St Vincent's Hospital and the Sydney Children's Hospital.

The Partnership is committed to improving health outcomes and service delivery for Aboriginal people living within the geographical regions covered by these local health districts. The Partnership works to improve the sharing of Aboriginal health information to enable timely and appropriate responses to local health priorities. Additionally, the Partnership aims to support the Aboriginal community-controlled health service charter and support the local health districts and specialty networks deliver on agreed priorities for the partners to guide joint action by the partners to 'close the gap' which includes address mental health and wellbeing, strengthen our workforce, improving chronic care, and building better health promotion across services and within communities.

Murrumbidgee Local Health District Partnership

St Vincent's and Murrumbidgee Local Health District have shared a long-standing relationship supported more recently by a formal Partnership Agreement, established in 2016, which seeks to strengthen the existing relationship by providing a structured referral program and workforce development through medical, allied health, Aboriginal health and nursing workplace placements across each of the facilities.
This collaboration has also sought to foster the development of innovative new models of care that service Aboriginal communities located in the Murrumbidgee District, with outreach clinics in the region supported by St Vincent's clinicians across a range of specialities.

As part of the Agreement, St Vincent's is also the designated care facility for critical care patients from within the Murrumbidgee district, whereby patients who require specialist care will receive priority transfer from Wagga Wagga or Griffith Base Hospital to St Vincent's for treatment. Additionally, St Vincent's and Griffith Base Hospital have established a critical care hotline for ICU retrievals.

Outreach programs

Diabetes

Aboriginal and Torres Strait Islander people experience diabetes at over three times the rate of non-Indigenous Australians, driving rates of chronic disease and reducing life expectancy.
To improve access to specialist care, St Vincent's Endocrinology Department and Diabetes Service founded the Diabetes Regional Education, Access, and Management (DREAM) initiative. In partnership with the Murrumbidgee Primary Health Network, this initiative supports 508 rural NSW communities.

"It has been very rewarding to work with local healthcare professionals to ensure the rural and regional diabetes population have access to the best possible, equitable care and experience," – Prof Jerry Greenfield

Pain management and Rehabilitation

Since 2015, St Vincent's Pain Clinic has delivered multidisciplinary pain management and rehabilitation services to Aboriginal people at Aboriginal Medical Service (AMS) in Redfern and in Kootungal.

The team provides comprehensive assessment, education, case conferencing and development of tailored management plans, enabling General Practitioners to connect patients with local providers, such as exercise physiologists, psychiatrists, psychologists, and dieticians.

Head and Neck

Aboriginal and Torres Strait Islander children experience significantly higher rates of otitis media (glue ear), contributing to hearing loss and affecting speech development, learning, and school engagement.

Since 2003, St Vincent's Otolaryngology department has provided pro-bono outreach clinics with the Pius X Aboriginal Medical Service in Moree, focused on improving ear health outcomes. Reflecting on the challenges and rewards of this work:

"Living in the country provides distinct challenges in accessing healthcare and I feel the medical community should endeavour to ensure that those living in regional areas should enjoy all the benefits of modern healthcare that those in the city enjoy" - A/Prof Nigel Biggs

Orthopaedics

SVHNS has provided orthopaedic consultation at the AMS in Redfern, supporting culturally safe orthopaedic care for Aboriginal patients. Allied Health (The Physiotherapy Department) has also had a long standing affiliated service lead by a Senior Physiotherapist.

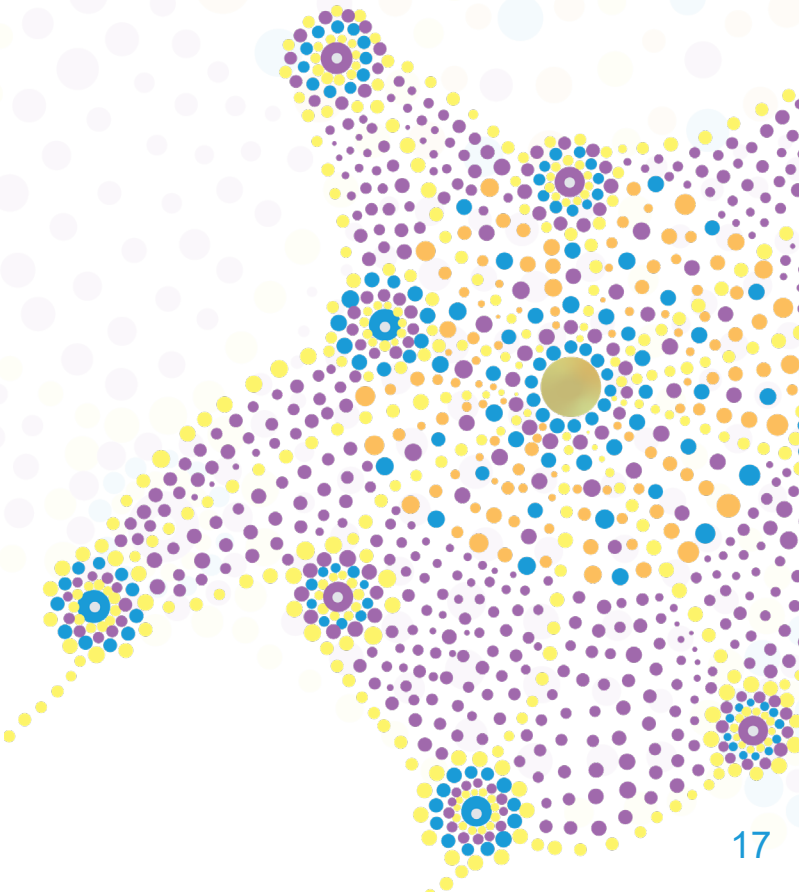
Cardiology

Heart disease is the leading cause of death for Aboriginal people, often occurring up to 20 years earlier and causing long-term complications. Since 2006, SVHNS has delivered monthly cardiology clinics at the Condobolin Aboriginal Medical Service in central NSW, supporting access to specialist care:

"Providing a comprehensive non-invasive Cardiology service to an otherwise isolated community has been the most rewarding… [and when needed], I can facilitate admission and inpatient care." - Prof Peter Macdonald

Health Equity

In 2023, SVHNS received a St Vincent's Clinic Research Foundation grant for the a 'Yarn'n Circle' project, aimed at strengthening community engagement and ensuring medical care meets the specific needs of Aboriginal people. This work has been pivotal in fostering trust and embedding Aboriginal perspectives into discharge planning and communication.



Strategic Direction 1:

Growing and supporting the Aboriginal health workforce

NSW Health Plan Outcome statement

Aboriginal people are valued, culturally safe, well supported and working in all levels, health disciplines, roles and functions of the NSW health system.

Why is this important?

A strong Aboriginal health workforce is a powerful driver of a more effective health system for Aboriginal people and families…To have true self-determination in health and wellbeing, Aboriginal peoples need equal representation in all roles, levels and locations across the NSW health sector'.

Key statements from SVHNS consultation

'If you want to keep us, understand us!'

'Aboriginal and non-Aboriginal people working side by side'

'Employment changes families'

What we heard?

SVHNS Aboriginal staff and community members who participated in St Vincent's consultation sessions expressed a strong need for improved career pathways, with a focus on education and development opportunities. The importance of having structured mentoring programs, shadowing or buddy systems for new starters, and ongoing support networks to help Aboriginal staff grow in their roles was identified as a priority, alongside a clear desire for more opportunities like internships and cadetships that could build skills and give a deeper understanding of and experience in different roles across the organisation.

Staff also emphasised the importance of support and advocacy from managers, and the value of having positions like a dedicated Aboriginal Engagement Officer to ensure that the needs of Aboriginal staff are met. Creating a strong and engaged Aboriginal Peer Support workforce was also seen as a crucial to creating a strong and engaged workforce overall that enhances cultural understanding and safety, empowers individuals and strengthens the workforce's resilience.

People spoke about the importance of career development days and structured support programs, especially after hours. They also emphasised the need for Aboriginal representation on committees and forums to ensure decisions and actions reflect the needs of the community, while being mindful of cultural load across the organisation. There was strong support for creating further opportunities for acting in higher positions where possible, and to create further autonomy and flexibility in their roles. Providing incentives for Aboriginal graduates, recognition of prior knowledge and learning, and establishing clear career planning and pathways will also help create long-term engagement within the organisation.

From our consultation and conversations, it's clear that creating a culturally safe and inclusive environment is a priority for our people. Aboriginal staff expressed the importance of fostering leadership and strong management support, including the presence of a robust Cultural Supervision Program. A Cultural Supervision Program through regular guidance and mentorship from a supervisor or a culturally knowledgeable leader can boost cultural competence, reduce burnout, promote growth, and support individuals in navigating cultural complexities in their work.

Opportunities in recruitment systems and processes were also emphasised, with the view to increase St Vincent's presence through targeted engagement via community events, universities, schools, and career expos. In particular, feedback recommended connecting with Aboriginal services and via Aboriginal owned channels, such as Koori Mail, as a means for more effective recruitment and retention via the community.

What we will do?

Our commitment

1. Establish structured mentoring programs, shadowing or buddy systems for new starters, and ongoing support networks to help Aboriginal staff grow in their roles including internships and cadetships
2. Implement a formal career support pathways that include formal development plans that consider leadership and career progression opportunities
3. Establish and embed a robust Cultural Supervision Program
4. Develop and implement sustainable workforce initiatives that value and remunerate the cultural expertise of Aboriginal staff and enable the formal inclusion and recognition of this expertise within their roles.
5. Identify key barriers to recruitment into and retention of Aboriginal people in NSW Health and develop any additional strategies required to address them
6. Develop and undertake targeted recruitment strategies across the business to promote SVHNS as an employer of choice for Aboriginal people

Case Study re Workforce:

Aunty Fay Carroll, a respected Aboriginal Elder, was dedicated to Closing the Gap in Aboriginal Health through education and championed nursing as a career for young Aboriginal people. In 2018, St Vincent's launched the Aunty Fay Carroll Training Program with TAFE NSW to support Aboriginal healthcare workers starting their careers, building skills, confidence, and career growth.

Since then, the program has helped 25 Aboriginal individuals gain education and entry-level roles in nursing, wardsperson, and other positions at St Vincent's. This success is thanks to the St Vincent's Curran Foundation and the commitment of Tay and Bernadette Wilson.

Tori Kingston, a recruit of this program, is completing a 28-day placement at St Vincents Hospital Sydney, and recently received the prestigious TAFE NSW Gili Award, which honours outstanding Aboriginal and Torres Strait Islander achievements. Passionate about supporting patients experiencing homelessness and those affected by drug and alcohol dependence, Tori has also developed a strong connection to caring for older adults with dementia. Her dedication and compassion truly shine within the St Vincent's team.

Strategic Direction 2:

Providing holistic, integrated person centred care

NSW Health Plan Outcome statement:

Aboriginal people have access to health care that is timely, high quality, effective, culturally safe, considers local context, and is responsive to and commensurate with their needs.

From the NSW Health Plan:

When the NSW health system considers the contexts of family, culture, community and Country, it can be more responsive to the needs of Aboriginal people... A responsive health system is one that embeds access to holistic, integrated, person- and family- centred healthcare, regardless of location'.

Key statements from SVHNS consultation:

'The plan will fail if non-Aboriginal people don't understand it'

'The environment must match the care delivery'

'Choice and control'

'Core business done well'

'Listening to patient stories and valuing lived experience'

'An environment where the oldest culture in the world is celebrated'

What we heard:

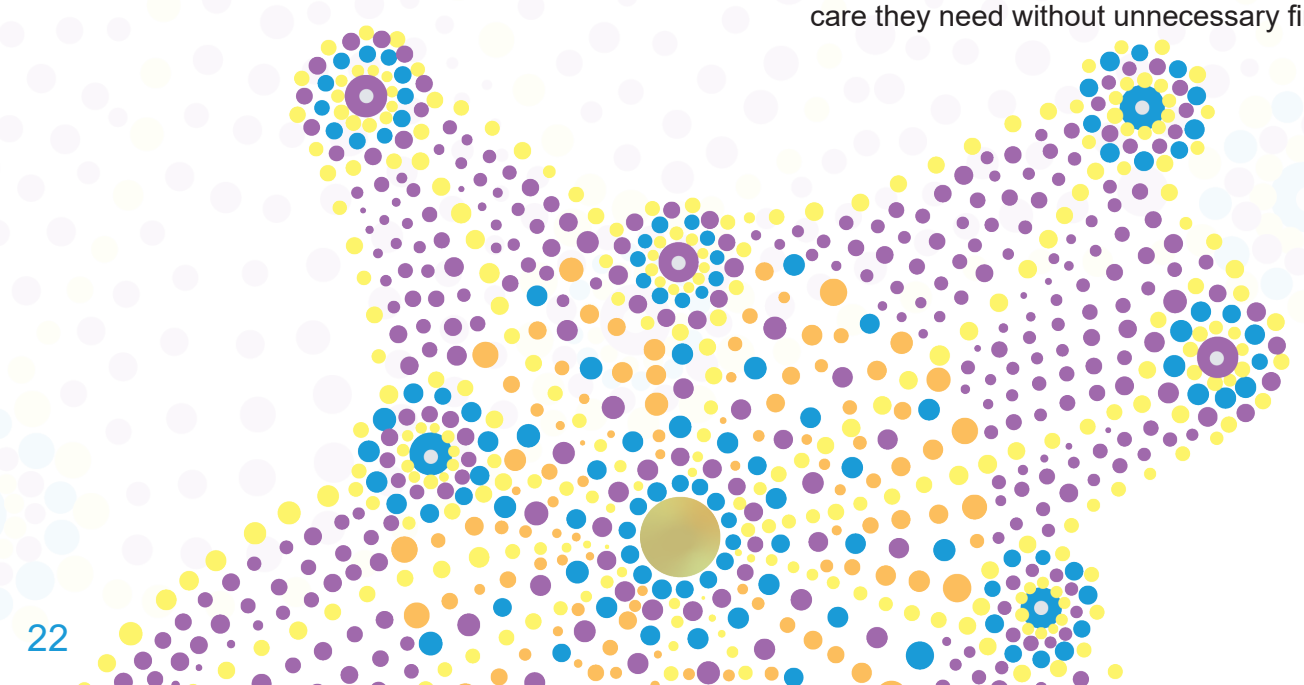
The feedback from Aboriginal staff and community members consulted highlighted the need for enhanced community services, including further specialised programs and more Aboriginal community nurses. Tailored in-home care that focuses on preventative care and education post admission was deemed essential for providing continuity of care and ensuring effective post-hospital support. There is a clear need for better, compassionate, educated, and culturally appropriate care across the health system, including via community health providers, that reduces fear and anxiety for patients and their families when accessing care and support.

When attending a hospital or facility, providing a welcoming and calming environment with designated safe spaces, appropriate signage, and family-friendly areas was seen as crucial for supporting Aboriginal patients. On discharge, connection to accessible services like to housing, mental health resources, and community services was also seen as vital in ensuring patients have the ongoing support they need.

Another priority identified was to enhance communication at all stages of the patient journey. Suggestions included new, more clearly defined pathways for communication, collaboration and integration between hospitals, General Practice and Primary Health Networks, Aboriginal health workers, and community services - particularly to ensure that Aboriginal patients and their families receive appropriate follow-up care. This is embedded in the principle that patients and families should feel supported throughout their healthcare journey, from their initial treatment to post-discharge, with access to ongoing support, education, and resources.

Clear communication, honesty, and transparency about the patient's condition, treatment options, and prognosis are vital for fostering trust. Having a single point of contact, such as a dedicated family social worker or Aboriginal Care Coordinator, was seen as beneficial for helping families navigate the healthcare system. Additionally, ensuring that patients and their families are involved in decisions about care, offering virtual options for communication, and providing culturally safe education are also essential components of a patient-centred approach.

A holistic, multidisciplinary approach to care delivery, supported by trained clinicians who understand culturally appropriate care, was seen as critical for ensuring positive outcomes for Aboriginal patients. There was also a strong emphasis on ensuring that Aboriginal patients have the choice and autonomy to make decisions about their treatment. Focusing on prevention and early intervention, streamlining referrals, and providing family support, including accommodation and transport options, were also identified as key priorities. Consistent and adequate funding was raised as a concern to support the travel and accommodation needs of rural patients and their families, ensuring they can access the care they need without unnecessary financial strain.



What we will do?

Our commitment:

1. Identify and address opportunities to enhance the continuum of care for patients in partnership with Aboriginal people and communities, with a focus on effective communication, coordinated care, transfer of care and discharge planning.
2. Reinforce existing and establish new partnership arrangements with Local Health Districts, Specialty Health Networks, ACCHOs and primary care providers across the region with a focus on improving connectivity of care
3. Investigate and implement options for expanding investment in policies, practices and positions that advocate for improved health system navigation and access to healthcare services for Aboriginal people.
4. In partnership with community, staff and partners, identify and implement culturally safe models of care across various settings.

Case study: Aboriginal Chronic Care Coordinator Service

St Vincent's recently launched a pioneering Aboriginal Chronic Care Coordinator Service—the only hospital-based role in NSW focused on Aboriginal and Torres Strait Islander patients with chronic and complex health conditions such as cardiac disease, cancer, renal disease, diabetes, lung disease, mental health, substance use, and homelessness. Led by Damien Davis Frank, the service provides culturally tailored care coordination, health coaching, and support to empower patients during hospital stays and ensure seamless, personalized discharge planning. By connecting patients with GPs, Local Health District Teams, and Aboriginal Community Controlled Health Organisations, the program aims to reduce unplanned readmissions and improve ongoing community care. Damien also advocates for culturally safe care by educating clinical teams about factors like intergenerational trauma and institutional racism, ensuring every patient's unique health goals and circumstances are understood and prioritized. Early outcomes are promising, including significantly reduced emergency presentations for frequent hospital users, demonstrating the service's vital role in enhancing Aboriginal health and wellbeing at St Vincent's.

Strategic Direction 3:

Enhancing health promotion, prevention and early intervention

NSW Health Plan Outcome statement:

NSW Health resources health promotion, prevention and early intervention initiatives that address Aboriginal-determined priorities and are delivered by or in partnership with the ACCH sector.

From the NSW Health Plan:

'Preventing illness and injury where possible and detecting and treating illnesses and injuries early in their progression, both protects the wellbeing of Aboriginal families and communities and reduces pressure on healthcare services.'

Key statements from SVHNS consultation:

'The focus and funding needs to be on prevention and early intervention'

'The focus and funding needs to be on prevention and early intervention'

The service and promotion delivered needs to be what the community needs

Health promotion needs to be promoted broadly across the whole community

'Services and health prevention should come to our communities'

'Better promotion on what services are available to us especially when the fly in and fly out services are coming'

What we heard:

For SVHNS to enhance health promotion for Aboriginal communities, we will work on a comprehensive strategy aimed at raising awareness and engaging Aboriginal people in health initiatives. This strategy would include communications via various channels, including attending local Aboriginal community hosted events where appropriate and possible, to support health promotion activities. We will also actively pursue meaningful opportunities for SVHNS Aboriginal health workers to be present in the community as part of their role or in areas of need, actively engaging with key stakeholders involved directly in health promotion initiatives, such as Aboriginal Medical Services and Primary Health Networks.

Further partnering with local leaders and organisations will also help to identify and develop targeted campaigns that address specific health needs within the community. This could involve joint workshops and training sessions to raise awareness of important health issues and preventative measures, as well as conducting more campaigns in partnership with community organisations and primary health. These efforts will aim to increase visibility and support for health promotion while fostering a deeper connection with the community building relationships by reaching out directly to where the community gathers. A key goal is to enhance collaboration with organisations including AMS Redfern and other key community groups to support programs focused on health promotion.

More specifically, SVHNS will seek to leverage its internal expertise relevant to the hospitals core specialties, with a focus on important health topics in heart health, organ donation and transplantation, mental health and cancer prevention and screening. This outreach will further strengthen SVHNS's role in the community and help create sustainable partnerships that improve health outcomes for Aboriginal people.

What we will do?

Our commitment:

1. Identify priority focus areas in health promotion, prevention and early intervention initiatives in partnership with Aboriginal people and community, ACCHO's, and Primary Health.
2. Establish and implement co-creation opportunities for commissioning, developing and delivering health promotion, prevention and early intervention initiatives for individuals, families and communities, including with priority population groups
3. Further pursue and foster partnerships and meaningful relationships with local leaders and organisations to enable ongoing contribution to initiatives that matter most into the future.

Case Study

SVHNS Homeless Outreach Team operates as a ‘single point of entry’ for the Homeless Health Service using a ‘no wrong door’ approach.

We operate outreach clinics and patrols daily in various locations throughout the city in partnership with local specialist homelessness services and drop in services. This allows us to provide brief intervention, assessment, treatment, referral and care coordination, with a focus on supporting people to access mainstream and specialist healthcare, accommodation and support.

This multidisciplinary team includes:

- GP
- Nurses
- Mental Health Clinicians
- Psychiatry
- Aboriginal Health Worker
- Peer Support Worker
- Oral Health Educator
- Complex Care Coordinator (senior social worker)

Our service seeks to ensure that Aboriginal people, and those from culturally diverse backgrounds, are able to receive culturally safe medical treatment, care, and a safe space to have a yarn about their health.

Strategic Direction 4:

Addressing the social, cultural, economic, commercial and political and planetary determinants of health

NSW Health Plan Outcome statement:

NSW Health is a leader in the elevation and application of social, cultural, economic, political, commercial and planetary determinants of Aboriginal health in the pursuit of improved health and wellbeing outcomes.

From the NSW Health Plan:

For Aboriginal people and communities, health is a more complex concept than the absence of physical disease, injury or illness experienced by individuals. It includes the physical, social, emotional and cultural wellbeing of the entire community in which each individual exists.

Key statements from SVHNS consultation:

'In essence this is about understanding and tackling the broader issues that affect health, beyond just medical care, to create healthier communities overall'

'Local plans by local people'

'The minute they walk in they feel safe, they will think good things come when they feel safe'

What we heard:

In order to address and foster a broader understanding of this strategic direction, SVHNS needs to first focus on continuing to educate all staff on the health impacts that Aboriginal communities face due to social, cultural, economic, political, commercial, and planetary determinants of health. These include aspects such as:

- The past and present living conditions of Aboriginal people, including issues like overcrowding, access to services, and a lack of housing.
- The ongoing and detrimental impact colonisation has had on indigenous people, including in terms of the loss of connection to land and cultural practices, which must be acknowledged
- Understanding how Aboriginal people value and manage finances, along with the impact of welfare, employment, and food security, and how this may affect their healthcare journey
- The unique ways in which Aboriginal communities' approach various issues, recognising the stereotypes and misunderstandings that exist in the broader community
- Commercially, the importance of prioritising Aboriginal business and employment, ensuring inclusion of Aboriginal consultants and businesses in capital planning and commercial decisions.
- The effects of climate change and how this has affected the land and people.

Through consultation it was clear that, in order to effectively address the social determinants and health inequities faced by Aboriginal people and patients, it is essential that the policies and programs developed by SVHNS are culturally informed and inclusive.

This means that Aboriginal people's input must be at the forefront of all decision-making processes. Policies should be developed and informed by Aboriginal Health Unit led consultation with communities and staff. While this process may take additional time, it is invaluable in creating long-term, sustainable change that respects Aboriginal culture and fosters health equity. This approach not only addresses immediate health needs but also empowers Aboriginal people by giving them an active role in shaping the health system that serves them.

It is crucial to also ensure the education of both Aboriginal and non-Aboriginal clinicians on the importance of culturally safe care, and the understanding that care needs will look different for each individual. Through co-designing policies and programs with Aboriginal communities, a collaborative partnership can be formed, promoting better health outcomes and sustainability. This partnership should focus on providing tailored support for Aboriginal patients, acknowledging that specific health nuances or needs may require flexibility in policies and procedures. For instance, designated health promotion days or weeks could be created to ensure Aboriginal patients have access to focused and relevant health screenings and support.

What we will do?

Our commitment:

1. Develop and/or source and provide capability strengthening initiatives for the health workforce on social and cultural determinants and how they relate to health impacts.
2. Further enhance and expand training and education on cultural safety and the delivery of culturally safe care
3. Identify social and cultural priorities in partnership with Aboriginal people and organisations, including priority population groups.
4. Undertake a thorough review of organisation wide policies and programs to ensure that they are culturally informed and inclusive.
5. Establish and implement co-creation opportunities for commissioning, developing and delivering social and cultural determinant initiatives, involving relevant non-health services and sectors.

Case Study/ Staff Profile – social determinants of health:

Tim Gray, a Gumbayngirr/Wiradjuri/ Bidjigal man, is the first Aboriginal Community Engagement Officer attached to St Vincent's Hospital Sydney's Gambling Treatment Program.

Tim provides support and advice to problem gamblers across south-eastern Sydney and works closely with similarly located Aboriginal health and community organisations and services provided by the NSW Department of Communities and Justice
.
Problem gambling is connected with a range of serious health and social issues, from financial stress to estranged relationships, substance dependence, domestic violence, and suicide. And with an estimated 20 per cent of people in Aboriginal communities identified as having a gambling problem – compared to 2 per cent of non-Indigenous Australians – Tim's role couldn't be more vital.

"The stigma of gambling is often worse than drugs and alcohol. There is so much shame," Tim says. "I want people to know they don't have to be afraid to have a yarn if they've got issues with gambling.
There is plenty of support around and you just need to get over that initial hurdle of the shame."

As someone with lived experience of problem gambling, Tim can support people to overcome any shame they might be feeling, and to accept the help they need.

"I started gambling when I was 14, and I gambled for 31 years. I know what the challenges are," Tim said. At the height of his gambling addiction, Tim was having suicidal thoughts, but it was his cat, Crystal, who became his lifeline: he knew someone had to feed and care for her. "The whole time when I was broke, I made sure she had food and litter, even if I didn't have anything," he said.

Tim stopped gambling with counselling support and is now determined to help others do the same. "I just sit down with people and have a yarn. I develop an ongoing relationship, and then I'll refer them to a counselling service, whether that's Gambling Anonymous or the St Vincent's Gambling Treatment Program. Whatever service a person wants to try, I'll support them through the process."

The most rewarding aspect of Tim's role is making a difference. "There are a couple of people in Redfern that I've already made an impact on. It's rewarding to see, it's the best part of a job like this. I want to help as many people as I can."

Strategic Direction 5:

Strengthening monitoring, evaluation research and knowledge translation

NSW Health Plan Outcome statement:

Aboriginal health monitoring, evaluation and research activities reflect Aboriginal identified priorities, align with good practice in Indigenous Data Governance and Sovereignty, and inform policy and program funding decisions through effective knowledge translation.

From the NSW Health Plan:

A robust evidence base of data through regular monitoring, evaluation and research is critical in enabling policymakers to drive quality policies and programs. Monitoring, evaluation and research support continuous quality improvement, transparency, and accountability of health systems to Aboriginal people and communities.

Key statements from SVHNS consultation:

'Aboriginal people are one of the most researched cultures in the world. If you are involved in research make sure you are acknowledged – you should be part of it and have full input.'

'Good outcomes for mob'

'When you put an Aboriginal Person in the room the conversation changes'

What we heard?

Ensuring that projects are led by or involve Aboriginal people is essential in creating meaningful, culturally appropriate healthcare programs. By having Aboriginal people at the helm, it ensures that the needs, values, and perspectives of Aboriginal communities are considered in a project's data collection, design and implementation. This also fosters empowerment and ensures that Aboriginal voices are central in decision-making processes. SVHNS is working towards using dashboards to make data transparent and accessible but further work is needed to ensure the accuracy, governance and culturally sensitive use of Aboriginal data.

Another priority raised was the accurate identification of patients' cultural backgrounds, especially at critical points like admission or during treatment. This ensures that healthcare providers are able to be more sensitive to cultural needs and to deliver services that are both relevant and respectful to each individual. It is vital to ask the question of Aboriginal identity in every aspect of care to enable this.

Having an Aboriginal health representative on governance committees is an important step in advocacy and cultural representation, noting that consideration of cultural load is important so that staff are not overwhelmed by the requirements of these commitments. SVHNS recognises that the cultural needs of Aboriginal people must be continually addressed at the decision-making level by all staff, helping to guide policies and initiatives that are culturally appropriate. Accurate cultural identification and representation at all levels of governance will improve healthcare outcomes and foster an environment of respect and inclusivity for Aboriginal patients.

Finally, to ensure the success of these initiatives, it is critical to invest in adequate consultation and engagement with stakeholders. This means involving Aboriginal communities, healthcare workers, and other relevant groups in the process to ensure that research projects are designed with the needs of the community in mind. Aboriginal sponsorship is key in ensuring that the projects are truly led by Aboriginal people and align with their needs.

What we will do?

Our commitment:

1. Identify and implement collaborative opportunities for Aboriginal staff across the health workforce to determine priorities for monitoring, evaluation and research
2. Identify and provide opportunities for Aboriginal staff across SVHNS to lead and/or participate in monitoring, evaluation and research teams
3. Establish and implement co-creation opportunities for monitoring and evaluating the progress and effectiveness of regional and local Aboriginal health strategic workforce plans.

Case study: Research

Monica Qiao, Allied Health, 2023 St Vincent's Clinic Research Foundation grant recipient

Monica Qiao, Health Equity Project Manager at St Vincent's Public Hospital received a 2023 St Vincent's Clinic Research Foundation grant for her research project 'Dalarinji Yarn'n Circle'. The project aims to prioritise community engagement, ensuring that medical interventions meet the specific needs of the Aboriginal population. Monica's research has been pivotal in fostering trust and providing culturally appropriate care through integrating Aboriginal perspectives into discharge planning and communication.

The Dalarinji: Our Health, Our Healing project was launched in response to concerning internal data showing that Aboriginal and Torres Strait Islander patients at St Vincent's Hospital experienced unplanned readmissions at nearly twice the rate of non-Aboriginal and Torres Strait Islander patients. This disparity prompted a systemic review to uncover underlying causes and develop culturally safe, sustainable solutions. Employing redesign methodology and co-design principles, the initiative prioritized Aboriginal and Torres Strait Islander leadership, with 70% of the project team identifying as Aboriginal and Torres Strait Islander and oversight provided by the all-Aboriginal and Torres Strait Islander Yarn'n Circle advisory committee. Diagnostic findings revealed that standard care planning failed to reflect holistic Aboriginal and Torres Strait Islander concepts of health and that existing communication methods were often culturally unsafe and ineffective, leading to disengagement.

In response, a culturally responsive Model of Care was developed, introducing initiatives such as Aboriginal Patient Rounding and Point of Care Education to foster trust, improve communication, and reduce avoidable readmissions. The project's legacy includes the ongoing influence of the Yarn'n Circle, which now contributes cultural expertise to diverse hospital programs and policies. However, the model's sustainability is challenged by its reliance on voluntary efforts. To ensure long-term impact and accountability, a key recommendation is to embed the Yarn'n Circle within the hospital's formal governance, setting a precedent in NSW and advancing health equity for Aboriginal and Torres Strait Islander communities.


Dalarinji
OURS BELONGING TO US

Appendix 1

Our Aboriginal Health Plan – consultation and stakeholder engagement

A comprehensive consultation process was undertaken to engage a range of stakeholders at multiple levels, ensuring that the voices of Aboriginal people and communities were integral to the plan.

St Vincent's engaged Louise Bye, a proud Ngiyampaa Wongaibon women with extensive experience in Aboriginal education and whole-government services across NSW, to help to lead both internal and external consultation. This included consultation with our community, our staff, our patients and our governing bodies - to gain insights into community-specific needs, helping to better understand and collaboratively determine solutions and opportunities to shift the dial on Aboriginal health and employment outcomes.

Throughout her career, she has worked with Aboriginal organisations, community groups and health providers in strategic planning and program development. She draws upon the Aboriginal values of respect reciprocity, and truth telling to create safe spaces where people can reflect, learn and grow.

This collaborative approach to consultation aimed to be inclusive and grounded in the lived experiences of Aboriginal people.

Our community

Community consultation was undertaken across three locations—Wagga Wagga, Griffith, and La Perouse—to inform a more culturally safe, person-centred, and responsive approach to care for Aboriginal and Torres Strait Islander people who receive care from St Vincent's.

Using culturally appropriate and participatory methods—such as Yarning Circles, group discussions, and collaborative scenario-building—participants shared insights on self-determination, truth telling, equity, and the social and cultural determinants of health. Activities also focused on strengthening the Aboriginal health workforce, promoting career pathways, and embedding Aboriginal knowledge and governance into health service delivery. This engagement process has provided critical direction for SVHNS to take meaningful, community-informed action towards systemic change.

Our staff

Staff consultation was conducted across multiple forums to ensure a broad range of perspectives from across the hospital were captured, including both Aboriginal and non-Aboriginal staff members.

- Two in-person workshops with our Aboriginal Health Unit, who provide essential support to Aboriginal patients, as well as their families and carers. These services include practical, social, and wellbeing support, as well as assistance with seeking accommodation for patients and families coming from regional, rural, and remote areas. The Aboriginal Health team collaborates closely with clinical, allied health, and integrated care teams to meet the diverse needs of Aboriginal patients.
- All Aboriginal staff were invited to participate in a yarning circle and workshop, with the opportunity to provide anonymous feedback via a post-workshop survey. The workshops focused on sharing decision-making power, challenging the status quo, and addressing racism. Additional discussions centred on workforce planning, promoting Aboriginal health careers, and ensuring care that is culturally safe and person-centred. Group discussions also highlighted ways to strengthen partnerships and eliminate gaps in service delivery, while a whole-group activity allowed participants to develop shared statements that will guide SVHNS in embedding Culture at the heart of care.
- An all-staff survey on the strategic directions was conducted to gather broader feedback on the hospital's long-term priorities, allowing staff from across the organisation to provide input on how we can improve our services and align with our vision.
- SVHNS senior managers were consulted in key daily management forums to explore how the NSW State Plan can be locally implemented. These forums focused on aligning the hospital's strategies with state-level priorities, ensuring that all levels of leadership are engaged in the delivery of key initiatives.

Our patients

- Individual patient surveys were conducted to gather feedback on patient experiences, focusing on care quality, cultural safety, and areas for improvement. This data provided key insights into how services can be more responsive to patient needs.
- In-person patient surveys by Aboriginal Health Unit staff captured real-time feedback from Aboriginal and Torres Strait Islander patients, helping to identify strengths and areas for improvement in culturally safe care.

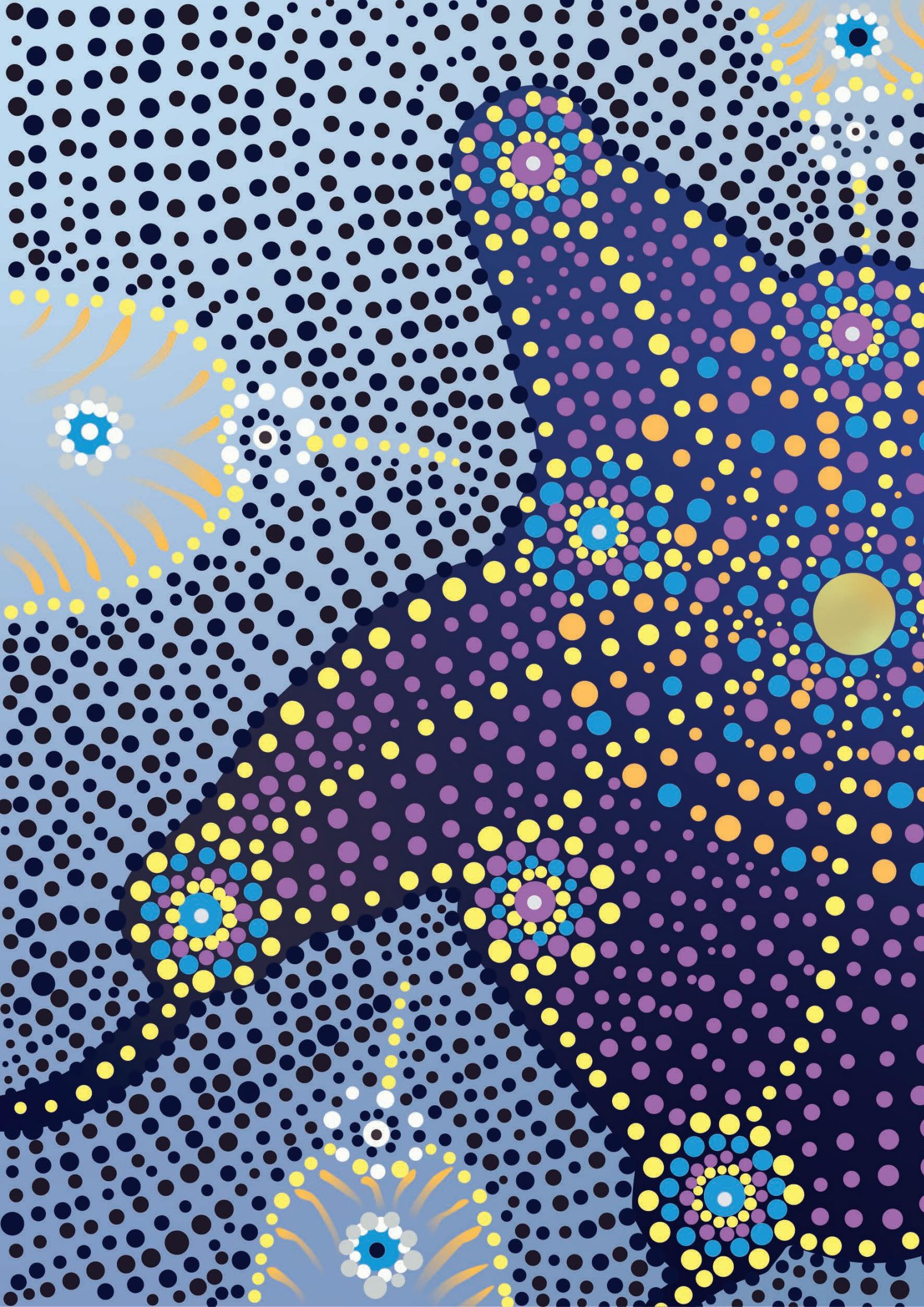
Our governance bodies

- The Dalarinji Aboriginal Health & Employment Committee reviewed community consultation insights and emerging themes, ensuring that Aboriginal perspectives are reflected in the development of our Plan.
- The Executive team yarning circle - engaged senior leadership to discuss cultural safety and equity, ensuring these values are integrated into decision-making and leadership.

Appendix 2

Strategic alignment

- National Aboriginal and Torres Strait Islander Health Plan 2021–2031: This plan outlines a vision for improved health and wellbeing for Aboriginal and Torres Strait Islander people, emphasizing a holistic approach that integrates cultural safety and responsiveness.
- St Vincent's Health Australia Strategy 2030: This strategy focuses on enhancing health services through innovation, inclusivity, and community engagement, with specific goals for improving Aboriginal health outcomes.
- Future Health Strategic Framework: This framework provides a blueprint for transforming health services to meet future needs, including strategies for addressing health disparities.
- NSW Aboriginal Health Plan 2024-2034: This state-level plan sets out priorities and actions for improving Aboriginal health across NSW, focusing on reducing health inequalities and enhancing service delivery.
- National Agreement on Closing the Gap: This agreement establishes a framework for collaborative action between governments and Aboriginal communities to close the gap in health and other outcomes.
- NSW Aboriginal Health Transformation Agenda: This agenda outlines strategic priorities for transforming Aboriginal health services and improving health equity in NSW.



Dalarinji

Better and
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Always.