

**Senate Finance and Public Administration Committee**

**ANSWERS TO ESTIMATES QUESTIONS ON NOTICE**

**HEALTH PORTFOLIO**

**Supplementary Budget Estimates 2016 - 2017, 21 October 2016**

**Ref No:** SQ16-000615

**OUTCOME:** 2 - Health Access and Support Services

**Topic:** National Aboriginal and Torres Strait Islander Health Plan 2013-2023

**Type of Question:** Written Question on Notice

**Senator:** Dodson, Patrick

**Question:**

Please provide a progress update for the Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023.

**Answer:**

*Implementation Plan Advisory Group*

The Implementation Plan Advisory Group (IPAG) has been established to provide engagement with Aboriginal and Torres Strait Islander health leaders to review, assess and guide actions under the Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023 (the Implementation Plan). The terms of references for the IPAG are at Attachment A.

IPAG held its first meeting on 16 September 2016 and agreed to focus its attention on Domain 1 – Healthy Systems Effectiveness, and Domain 7 – Social and Cultural Determinants of Health, while noting that Domains 2 through 6 are core business of the Department of Health funded through the Indigenous Australians' Health Program.

IPAG will play a key role in engaging across the sector to identify new priorities and emerging opportunities and in drafting the next Implementation Plan, due in 2018. The revised Implementation Plan will reflect increased engagement across Commonwealth and state and territory governments and the Indigenous health sector and will focus on addressing the social and cultural determinants of health.

*Engagement with States and Territories*

In August 2016, states and territories, through the Australian Health Ministers' Advisory Council, agreed to contribute to the next iteration of the Implementation Plan. State and territory involvement will support a more comprehensive, shared approach to Indigenous health issues focused on clear areas of alignment and mutual benefit and responsibility.

*Reporting against the Implementation Plan*

To monitor progress, the Implementation Plan introduces 20 new goals focused on improving the health of pregnant women, reducing smoking, tackling diabetes, providing more health checks and achieving better immunisation rates.

The Department of the Prime Minister and Cabinet will release the updated Health Performance Framework in May 2017, which will include reporting against the Implementation Plan goals.

The Implementation Plan also sets out specific deliverables that will be reviewed and monitored in partnership with Aboriginal and Torres Strait Islander health leaders. The Department of Health is tracking current activities against the Implementation Plan deliverables and a considerable number have been achieved or are on track to be achieved by 2018.

Some examples include:

- A minimum of five per cent of National Health and Medical Research Council funding is directed to Aboriginal and Torres Strait Islander health. A recent example is \$10.6 million being invested to support research partnerships and strengthen the evidence base of Aboriginal and Torres Strait Islander health.
- A National Diabetes Strategy has been developed, with work moving into the implementation phase.
- The Cultural Respect Framework for Aboriginal and Torres Strait Islander Health 2016-2026 has been launched and will support mainstream health system providers to provide culturally competent service delivery.
- Access to antenatal/postnatal care and support for Indigenous mothers and children is being addressed through the Better Start to Life initiative which includes the expansion of The Australian Nurse-Family Partnership Program and New Directions: Mothers and Babies Services to identified at-risk regions.

## **Implementation Plan Advisory Group - Terms of Reference**

### **Membership**

The Implementation Plan Advisory Group will comprise up to 13 members, including:

- Three representatives of the National Health Leadership Forum;
- One Torres Strait Islander representative;
- One Indigenous early childhood expert;
- One Indigenous acute health care expert;
- Two representatives of the Department of Health;
- Two representatives of the Department of the Prime Minister and Cabinet;
- One representative of the Australian Institute of Health and Welfare; and
- Two state and territory representatives from the National Aboriginal and Torres Strait Islander Health Standing Committee.

The Implementation Plan Advisory Group may also co-opt other individuals or representatives of organisations from time to time with the agreement of both Co-Chairs where special expertise or experience is required to assist the Implementation Plan Advisory Group in its work.

### **Chair**

The Implementation Plan Advisory Group will be Co-Chaired by the Chair, National Health Leadership Forum, and the First Assistant Secretary, Indigenous Health Division, Department of Health. Meeting will be Co-Chaired collaboratively.

### **Roles and responsibilities**

The role of the Implementation Plan Advisory Group is to provide advice to the Departments of Health and the Prime Minister and Cabinet as they monitor and review the Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023.

The Implementation Plan Advisory Group will:

- Review progress of the Implementation Plan annually with a particular focus on assessment of actions and progress against goals;
- Assess the whole health system biennially and progress against social and cultural determinants of health, primarily through the Aboriginal and Torres Strait Islander Health Performance Framework; and
- Guide action under the Implementation Plan, including addressing issues of policy and strategy that impact on the delivery of the Implementation Plan.

### **Meetings**

The Implementation Plan Advisory Group will meet face-to-face at least twice a year in Canberra. Additional meetings may be held by teleconference. Meeting papers will be circulated in advance of meetings and will be considered in-confidence by all members. The Department of Health will provide secretariat support.

The Department of Health may also seek the Implementation Plan Advisory Group's advice on an 'out-of-session basis'. The Secretariat will circulate comments to members and provide a summary at the subsequent meeting.

At least one of the National Health Leadership Forum, the Department of Health, and Department of the Prime Minister and Cabinet members must be present for a quorum, including at least one Co-Chair.

Members may deputise a representative to attend a meeting on their behalf by notifying the Co-Chairs prior to the meeting.

Members will be asked to declare any actual or potential, real or perceived conflicts of interest, at each meeting.

There will be no sitting fees provided for meetings; however travel costs (limited to flights/car/accommodation and taxi expenses) will be paid for by the Department of Health for subject matter experts whom are requested to attend at the agreement of the Co-Chairs.