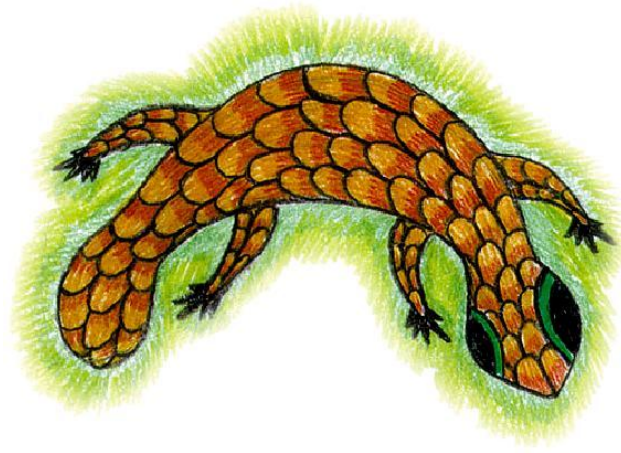


Port Lincoln Aboriginal Health Service



Strategic and Supplementary Plans 2012-16

Strategic Plan ratified by BOM June 2012
Supplementary Plans ratified by Senior Management June 2012
Version 1.0

Contents

A Message from the Chairperson of the Board of Management	3
Our Vision, Mission, Values and Understandings	4
Our Vision.....	4
Our Mission.....	4
Our Values.....	4
Our Understandings.....	4
Our client base	5
Governance.....	6
PLAHS Corporate and Service Structure	7
Strategic Priorities July 2012 to June 2016	8
Strategic Priorities, Goals and Strategies.....	9
Strategic Priority One – Improving the infrastructure and facilities.....	9
Strategic Priority Two – Improving the workforce.....	11
Strategic Priority Three – Maximising sustainability.....	13
Strategic Priority Four – Provision of effective clinical services	14
Strategic Priority Five – Reducing harm from substance misuse and gambling.....	18
Strategic Priority Six – Addressing grief and loss.....	21
Strategic Priority Seven – Improving family and community support.....	22
Strategic Priority Eight – Improving collaboration and advocacy.....	25
Strategic Priority Nine – Improving perceptions of PLAHS	27
Appendix A Strategic Positioning and Collaboration Plan 2012-16.....	28
Introduction	28
Service Delivery at PLAHS	29
Collaboration with other Providers	30
Referring to other Providers	31
PLAHS Client Base	32
The Locations for Service Delivery	32
PLAHS as a provider of quality health services	33
The People of PLAHS.....	33
Appendix B Asset and Infrastructure Plan 2012 – 2016	34
Appendix C Workforce Plan 2012-2016.....	37

A Message from the Chairperson of the Board of Management

As chairperson of the Board of Management I am happy to present the Port Lincoln Aboriginal Health Service Strategic Plan for 2012-16. The plan is the result of community consultation, an environmental scan and a number of workshops involving both the staff and Board of Management.

The Strategic Plan will guide the governance, activities and service delivery of PLAHS over the next five years. The plan is designed and will be published in a number of forms to make it accessible to Board Members, PLAHS employees, clients of PLAHS, the broader Aboriginal Community of Port Lincoln and other health providers.

Our Vision, Mission, Values and Understandings

Our Vision

The Port Lincoln Aboriginal Health Service will strive to maintain our autonomy and cultural identity as an Aboriginal Community Controlled Health Service whilst delivering quality, holistic primary health care services to the Aboriginal community.

Our Mission

To provide leadership, direction and support on community health issues and to strengthen the capacity of individuals, families and communities to improve the health and social wellbeing of our people.

Our Values

The values of PLAHS guide our attitudes and behaviours. They influence both the way we work together and what clients can expect from us.

These values are:

Self-determination through Aboriginal ownership and control

Holistic, comprehensive Primary Health Care

Treating staff and clients with respect, compassion, consideration, listening, understanding, equality and confidentiality

Leadership, innovation and collaboration

Safe environment

Our Understandings

PLAHS understands that:

Aboriginal health is not just the physical wellbeing of an individual but is the social, emotional and cultural wellbeing of the whole community in which each individual is able to achieve their full potential thereby bringing about the total wellbeing of their community. It is a whole-of-life view and includes the cyclical concept of life-death-life.

(National Aboriginal Health Strategy 1989)

PLAHS accepts that health outcomes are influenced by a range of social determinants, many of which are outside our direct control.

In broad terms, economic opportunity, physical infrastructure and social conditions influence the health of individuals, communities, and societies as a whole. These factors are specifically manifest in measures such as education, employment, income, housing, access to services, social networks, connection with land, racism, and incarceration. On all these measures, Indigenous people suffer substantial disadvantage. For many Aboriginal people, the ongoing effects of 'protection' and the forced separation of children from their families compound other social disadvantages.

(Adapted from 'The Overview of Indigenous Health 2011')

PLAHS accepts the following definition of Primary Health Care that has been adapted from one developed by the Australian Primary Health Care Research Institute.

Primary health care is socially appropriate, universally accessible, evidence based first level care provided by health services and systems with a suitably trained workforce comprised of multi-disciplinary teams supported by integrated referral systems in a way that:

- *addresses health inequalities; and*
- *maximises community and individual self-determination; and*
- *involves collaboration and partnership with other sectors to promote public health.*

Comprehensive primary health care includes health promotion, illness prevention, healing treatment and care, community development, advocacy and rehabilitation.

Our client base

PLAHS mainly provides services to Aboriginal clients from the local Port Lincoln Aboriginal Community but also services transient clients from across the western and northern sections of South Australia and the rest of Australia.

The composition of the client population that accessed services provide by PLAHS in the twelve months to April 2012 was:

Total number	1538
• Aboriginal	1391
• Torres Strait Islander	3
• Aboriginal and Torres Strait Islander	9
• Non-ATSI	135

Active clients are defined as those that have used the services of PLAHS three times in the last two years. The composition of the active client population at the end of March 2012 was:

Total number of active clients	1351
Current	884
Transient	245
Past Patients	222
Active clients that live in the local 5606 postcode area	1170

Governance

PLAHS is an Aboriginal Community Controlled Health Service, governed by local Aboriginal people for the local Aboriginal Community.

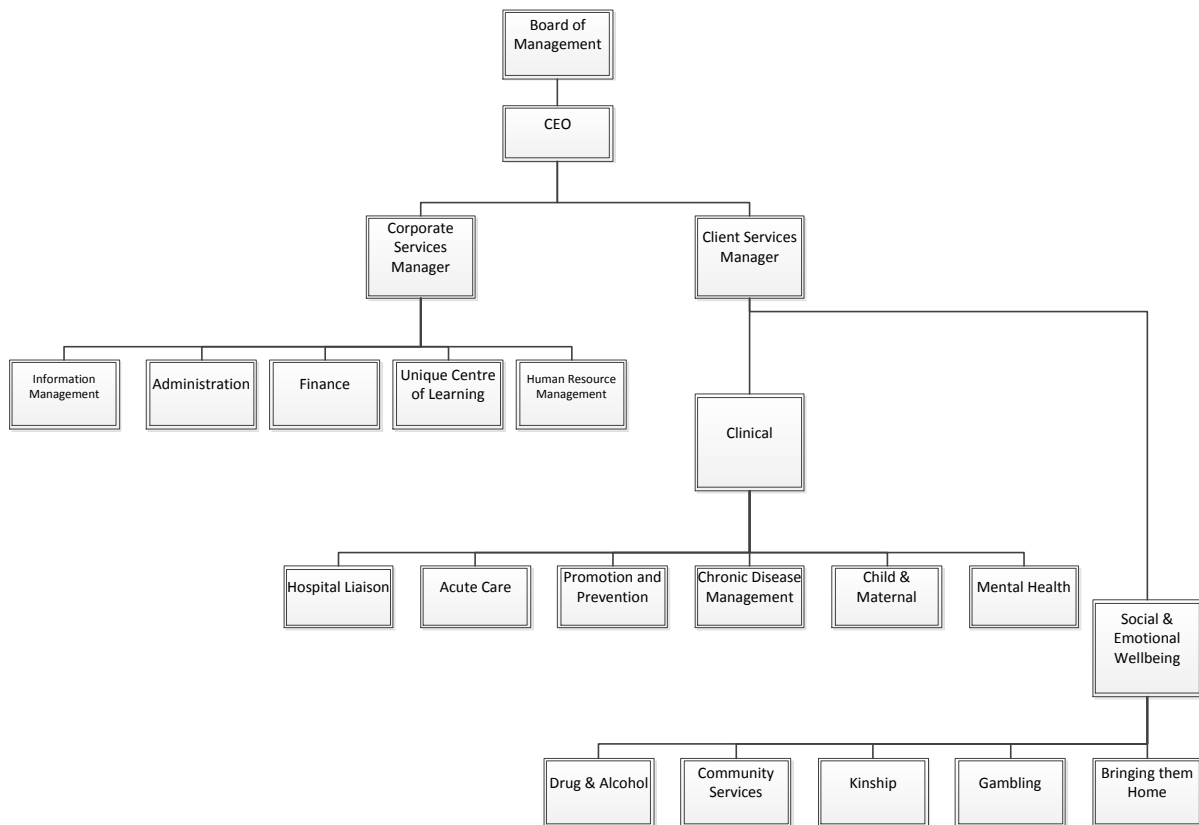
PLAHS is a member of the National Aboriginal Community Controlled Health Organisation (NACCHO) and an affiliate of the Aboriginal Health Council of South Australia (AHCSA).

As required by the PLAHS constitution, a Board of Management is elected annually by Aboriginal people from the local community and meets monthly, thus providing the local Aboriginal Community an involvement in the decision making process and the monitoring of programs at PLAHS.

The PLAHS Board of Management consists of:

- Chairperson
- Vice-chairperson
- Treasurer
- Secretary
- Public Officer
- Youth Representative
- Two general members

PLAHS Corporate and Service Structure



Strategic Priorities July 2012 to June 2016

As the result of an environmental scan and consultations with member of the Board of Management, clients, staff, and the wider Port Lincoln Aboriginal Community, PLAHS has identified nine strategic priorities for the five years to June 2012.

- 1. To develop both the physical infrastructure and the facilities at PLAHS to provide an environment that promotes primary health care and client comfort as well as providing a safe and effective work place.*
- 2. To improve the capabilities, qualifications and the effectiveness of the PLAHS workforce.*
- 3. To maximise the sustainability of PLAHS by retaining Royal Australian College of General Practitioners (RACGP) accreditation, gaining Quality Improvement Council (QIC) accreditation and by securing funding from a range of sources.*
- 4. To develop and deliver a range a clinical service and programs that meet the specific needs of the local Aboriginal Community.*
- 5. To develop and deliver programs that improve well-being by reducing the harm to individuals, families and the community, caused by alcohol, tobacco, drug misuse and gambling.*
- 6. To improve the capacities of individuals and the community to cope with the negative impacts of grief and loss on their well-being.*
- 7. To provide community development and engagement opportunities aimed at improving community and family health, responsibility, leadership, parenting and the skills of everyday living.*
- 8. To develop and document the relationships between PLAHS and other health service providers, Aboriginal organisations, advocacy groups and with all levels of government.*
- 9. To promote PLAHS as a leading organisation in the local Aboriginal Community, the wider Aboriginal health sector, and amongst mainstream health service providers.*

Strategic Priorities, Goals and Strategies

Strategic Priority One – Improving the infrastructure and facilities

To develop both the physical infrastructure and the facilities at PLAHS to provide an environment that promotes both primary health care and client comfort as well as providing a safe and effective work place.

Goals	Strategies	Inclusion in Action Plan
<p>To develop a master plan for increasing and improving the physical work spaces at PLAHS that includes improving the utilisation of;</p> <ul style="list-style-type: none"> • the existing clinics and offices • the reception area • the upstairs attic area • the space between PLAHS and Oxford Terrace • the Haigh Street premises <p>The plan needs to also take into account the requirement for improved ventilation in the clinics and in other parts of the building.</p>	<p>Consult with staff, clients and the wider Port Lincoln Aboriginal Community for ideas and feedback.</p>	2012
	<p>Consult with builders, architects, council to determine the feasibility of master plan</p>	2012-13
<p>To develop the upstairs attic to provide more work space.</p>	<p>Determine the exact functions to be catered for in the redevelopment.</p>	2012-13
	<p>Contact builder/architect to develop a plan and costing for the redevelopment.</p>	2012-13
	<p>Apply for funding for redevelopment</p>	2012-13
	<p>Implement the building program</p>	2015-16

To redevelop Haigh Street as a multifunction centre	Determine the exact functions to be catered for in the redevelopment.	2012-13
	Contact builder/architect to develop a plan and costing for the redevelopment	2013-14
	Apply for funding for the redevelopment	2014-15
	Implement the building program	2015-16
To improve the layout of the reception area to provide; <ul style="list-style-type: none"> • a more welcoming environment and • a private area for patients who are waiting and who are feeling very unwell. 	Determine the exact functions to be catered for in the redevelopment.	2012-13
	Contact builder/architect to develop a plan and costing for the redevelopment	2012-13
	Apply for funding for the redevelopment	2012-13
	Implement the building program	2013-14
To improve ventilation in the clinics and other parts of the building	Contact air conditioning / ventilation specialist	2012-13
	Get quotes for the improvement to the air conditioning / ventilation system.	2012-13
	Implement improvement to the air conditioning / ventilation system	2012-13

Strategic Priority Two – Improving the workforce

To improve the capabilities, qualifications and the effectiveness of the PLAHS workforce.

Goals	Strategies	Inclusion in Action Plan
To improve the effectiveness and accountability of the PLAHS workforce	Develop a statement defining the role of each team.	2012-13
	Review the suitability of, and compliance with, individual job and person specification and role descriptor at each staff member’s annual staff appraisal.	2012-16
	Develop a training plan for each staff member. The plan should relate to the staff member’s area of work and to the core business of PLAHS. Revise training plans annually during staff appraisals.	2012-16
	Source increased funding that is specifically allocated to staff training.	As required
	Involve staff in the development of a ‘PLAHS Staff Code of Conduct’	2012-13
To improve the effectiveness of Human Resource Planning	To identify, from strategic or annual plans any additional roles required. Develop, document and annually review a Workforce Plan. Source funding for any additional staff.	2012-16
	Review and document the roles, responsibilities and accountabilities of Aboriginal Health Workers in light of their pending registration with the Australian Health Practitioners Registration Authority.	2012-14
	Improve succession planning by developing effective documentation to capture the expertise, skills and knowledge of current staff members.	2013/14
To improve communication and decision making at PLAHS	Develop a communication protocol based on best practice guidelines.	2012/13

<p>To better utilise the existing Employee Assistance Program</p>	<p>Promote the existing Employee Assistance Program to PLAHS staff and their families.</p> <p>Annually review of the use and satisfaction with the Employee Assistance Program.</p>	<p>2012-16</p>
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Strategic Priority Three – Maximising sustainability

To maximise the sustainability of PLAHS by retaining Royal Australian College of General Practitioners (RACGP) accreditation, gaining Quality Improvement Council (QIC) accreditation and by securing funding from a range of sources.

Goals	Strategies	Inclusion in Action Plan
To retain the rating that allows PLAHS to qualify for three-year or longer core-funding from OATSIH. To secure on-going and ad hoc program funding from other sources including CountryHealthSA.	Continuously improve the monitoring and achievement of KPIs. Comply with all deadlines associated with reporting requirements. Comply with all deadlines associated with plan submissions.	2012-16
To retain RACGP accreditation and to achieve QIC accreditation.	Document and implement all policies, procedures, role definitions, delegations and accountabilities Establish all required registers Establish and document all required systems	2012-13
	Conduct all required audits and other required QI activities Establish, document and monitor our continuous improvement activities	2012-16

Goals	Strategies	Inclusion in Action Plan
	Source funding for a cardiac and pulmonary rehabilitation facilitator. Recruit and select, or train an existing staff member to fill the role.	2012-13
To improve the ability of PLAHS to monitor, plan for, and adapt to changing client demographics and needs.	<p>Improve the accuracy of data that can be used to monitor and plan for changes.</p> <ul style="list-style-type: none"> • Provide effective, program specific training in data entry so that consistency is promoted. • Identify and document the critical clinical indicators and KPIs. • Ensure that staff are trained how to accurately collect data. <p>Annually review changes in community demographics, disease profile, and service requirements. Plan for, and implement, any required changes in workforce composition.</p>	2012-16 2012-16
To provide a culturally safe work place where the workforce respects and understands the client journey.	Provide regular and varied Cultural Safety training e.g. the holistic health approach	2012-16
To implement and sustain the Aboriginal Maternal and Infant Care program	<p>Provide organisational support for Aboriginal Maternal and Infant Care (AMIC) workers</p> <p>Finalise AMIC service agreements</p>	2012-16 2012-16
To improve home and community visits	<p>Annually review the 'safe home visiting' policy.</p> <p>Conduct community consultation about home visits to improve the match between PLAHS home visiting processes and priorities and the expectations and needs of the community.</p>	2012-16 2013-14
To improve school screening protocols and procedures to allow for a focus of obesity, life skills and sexual health.	<p>Provide staff training on the school screening procedures that includes instruction on the use of equipment and data entry.</p> <p>Schedule this training utilising a formalised training calendar</p> <p>Appoint a training coordinator to ensure that training occurs.</p>	2012-16

Goals	Strategies	Inclusion in Action Plan
	Modify school screening procedures, forms and data entry to incorporate the findings from Dr. David Johnson's 2011 review of school screening. Include in this review the development of year level specific screening protocols and a further definition of the skills that PLAHS staff and other health professional will bring to the process.	2012-13
To improve the quality of life for clients by improving the management of joint and other pain	<p>Continue to utilise the Chronic Disease Management services available at PLAHS. Develop programs that target the specific needs of clients with joint pain and others requiring general pain management.</p> <p>Annually review the policy that deals with the prescription of pain medication.</p> <p>Improve and increase the utilisation of the physiotherapy services currently offered at PLAHS.</p> <p>Increase client utilisation of the gym at Mallee Park. Increase the range of gym equipment.</p>	<p>2012-16</p> <p>2012-16</p> <p>2012-16</p> <p>2012-16</p>
To improve transport services currently available at PLAHS and include the capability to transport disabled clients.	<p>Annually review the policy that defines the level and type of transport services to be provided by PLAHS.</p> <p>Either purchase or modify a vehicle to improve transport for clients with disabilities or provide cabcharge vouchers so that clients can access a suitable service.</p> <p>Increase community awareness of the actual purpose and priorities of the transport service provided by PLAHS.</p>	<p>2012-16</p> <p>2013-14</p> <p>2012-16</p>
To provide mental health services to cover depression, dystopia, bipolar, anxiety, schizophrenia, psychosis, post natal depression, post traumatic, distress syndrome	Review all mental assessment tools used within PLAHS and provide education and training for their use e.g. K10, Edinburgh post natal, and Indigenous Risk Impact Screen (IRIS).	2012-13

Goals	Strategies	Inclusion in Action Plan
	<p>Implement these tools into the relevant assessments and client care</p> <ul style="list-style-type: none"> • Establish working group • Identify what mental health assessment tools are currently being utilised, their suitability and the consistency of their use • Obtain information and advice from relevant groups, e.g. Mental Health <p>Develop a flow chart to ensure appropriate referral pathways are implemented.</p>	

Strategic Priority Five – Reducing harm from substance misuse and gambling

To develop and deliver programs that improve well-being by reducing the harm to individuals, families and the community, caused by alcohol, tobacco, drug misuse and gambling.

Goals	Strategies	Inclusion in Action Plan
<p>To adopt an early intervention, preventative and educative approach to reducing the harms of substance misuse</p>	<p>Employ two full time youth workers, one male and one female to work with 8-15 year old. Their role is to be based around community development, case management and health promotion.</p>	<p>2012-16</p>
	<p>Employ a Men’s Health worker to develop and strengthen the existing Men’s health program and to initiate a Men’s shed facility and to promote positive fathering.</p>	<p>2012-16</p>
	<p>Develop and deliver a ‘living skills’ program for young adults that covers budgeting, cooking, hygiene, family, parenting skills and relationships. The proximity of PLAHS to the high school may allow the inclusion of a program for young people that could be run after school (3.30-5.00pm) offering a range of cooking and other life-style activities.</p>	<p>2012-16</p>
	<p>Develop and encourage a culture of community volunteering and participation that includes, but is not restricted to, mentoring of young community members. Collaborate with Eyre Futures.</p>	<p>2012-16</p>
	<p>Develop better systems for supporting the aged members of the community. This may include volunteers to help with home-based care.</p>	<p>2012-16</p>
<p>To improve current case management practices to encourage more self-direction and self-management by the client.</p>	<p>Recruiting and/or training more staff to work in the Case Management Team. Develop links to local and state organisations to facilitate access to detox and rehabilitation facilities.</p>	<p>2012-16</p>

Goals	Strategies	Inclusion in Action Plan
<p>To initiate and promote the development of a collaborative Community Drug and Alcohol Team to examine and, if appropriate, implement a range of initiatives aimed at reducing the harm caused by substance misuse and gambling.</p> <p>The team members will be sought from;</p> <ul style="list-style-type: none"> • Aboriginal Community • Police • Mallee Park Football Club • Port Lincoln Football League • Port Lincoln Aboriginal Community Council • Parents • Youth • Churches • Crime prevention agencies • West Coast Youth and Community Services • Port Lincoln City Council • District Council of Lower Eyre Peninsula • Hoteliers • Other relevant agencies 	<p>The team will coordinate an examination of;</p> <ul style="list-style-type: none"> • drug trends • local issues • underage alcohol usage • cannabis use • prescription and over-the-counter drug misuse • gambling <p>The team will coordinate advocacy for;</p> <ul style="list-style-type: none"> • political action • educational services • local solutions to local problems • challenging liquor licensees for inappropriate practices • sporting clubs to become models for responsible serving of alcohol • night patrols and curfews involving volunteers and parents • smoke free / alcohol free / drug free home signage 	<p>2012-13</p>

Goals	Strategies	Inclusion in Action Plan
	The team will coordinate education via; <ul style="list-style-type: none"> • TV and other media that use local personalities as role models • parenting information session and the production and/or distribution of printed material. 	2012-16

Strategic Priority Six – Addressing grief and loss

To improve the capacities of individuals and the community to cope with the negative impacts of grief and loss on their well-being.

Goals	Strategies	Inclusion in Action Plan
To determine, as perceived by the community, the priority order of issues concerning relationships, loss of health, family, family violence, trauma, sexual abuse and other significant losses	Establish a working party to plan, design, run and analyse the survey that is to target males and females over 18 years of age.	2013-14 & 2015-16
To provide grief and loss counselling services to community members and staff.	Establish working party to plan and coordinate service delivery.	2012-13
	Provide <ul style="list-style-type: none"> • One-on-one counselling • Group session e.g. Life Improvement for Everyone (LIFE) course, grief and loss treks, yarning circles, narrative therapy, workshops using external facilitators e.g. from the Dulwich Centre • Seasons for Growth courses four times a year. This will require identification of clients, venues, suitable dates and facilitators Find sources of funding for services. Arrange training for staff to enable service provision.	2012-16
To investigate the setting up of a memorial garden	Contact relevant organisations to ascertain need, feasibility, and interest.	2013-14

Strategic Priority Seven – Improving family and community support

To provide community development and engagement opportunities aimed at improving community and family health, responsibility, leadership, parenting and the skills of everyday living.

Goals	Strategies	Inclusion in Action Plan
<p>To better prepare youth for the role and responsibilities of adulthood and to encourage them to accept leadership roles</p>	<p>Employ or allocate a male and female worker to specifically target working with young adults (14 to 30 years of age).</p>	<p>2012-13</p>
	<p>Improve links between PLAHS and</p> <ul style="list-style-type: none"> • Port Lincoln High School • Port Lincoln Aboriginal Community Council • FamiliesSA • Parental and Community Engagement (PACE) • West Coast Youth and Community Services • Uniting Care Wesley <p>to collaboratively deliver life skills specific programs concentrating on parenthood, behavioural roles, budgeting and family relationships.</p>	<p>2012-13</p>
	<p>Maintain and improve the links with, and support for, the <i>'young guns'</i> program. Duplicate a similar program for the young women of the community.</p>	<p>2012-16</p>
	<p>Establish a mentoring program to help young people adapt to the requirements of adulthood.</p>	<p>2012-16</p>
	<p>Develop and implement a leadership development program that could be modelled on the current Mallee Park Football Club leadership group development processes.</p>	<p>2012-16</p>

Goals	Strategies	Inclusion in Action Plan
	<p>Collaborate with the Elders Group to develop a program that;</p> <ul style="list-style-type: none"> • promotes responsibility • records stories • records genealogy and family connections <p>Lobby for funds for the programs from Far West Traditional Lands Association, from philanthropic groups or from other sources</p> <p>Review or audit the progress of programs to provide a basis for continuous improvement.</p>	<p>Quarterly meetings 2012-16</p>
<p>To develop a plan for, and implement , a community garden</p>	<p>Maintain links with the Healthy Lifestyle Coordinator, CountryHealthSA, Port Lincoln Aboriginal Community Council and others.</p> <p>Promote interest in the garden within the community – Aboriginal and non-Aboriginal.</p> <p>Negotiate with Port Lincoln Aboriginal Community Council to secure the long term use of land on Third Avenue for the Community Garden.</p> <p>Secure ongoing funds for a garden supervisor.</p> <p>Provide educational program around the theme of ‘Grow, Cook and Eat’.</p>	<p>Plan during 2012/13 Implement during 2013/14</p>
<p>To support families by improving the knowledge and skills required for establishing and maintaining successful parenting relationships.</p>	<p>Promote the importance of parenting and family values via electronic and print media using local personalities.</p> <p>Survey fathers to determine their training needs and what they would hope to gain from a parenting course.</p> <p>Collaborate with Port Lincoln High School, other schools and Mallee Park Football Club to run three parenting courses per year. One of these courses should be specifically targeted at fathers.</p>	<p>2012-16</p>

Goals	Strategies	Inclusion in Action Plan
To model collaborative relationships and appropriate communication methods in the community	<p>PLAHS to build and sustain effective and harmonious relationships with a range of Aboriginal and non-Aboriginal agencies e.g. Family Violence, Police, Elders, Leadership Group, Young Guns.</p> <p>Provide education and awareness</p>	2012-16
To improve budgeting and cooking skills in the community	<p>Identify the target audience for life skills courses. This could include young mothers and fathers.</p> <p>Continue to run the Nunga Kids Café program</p> <p>Continue to link into, or promote, life skill programs that are already running e.g. Young Guns, West Coast Youth and Community Support.</p>	2012-16

Strategic Priority Eight – Improving collaboration and advocacy

To develop and document the relationships between PLAHS and other health service providers, Aboriginal organisations, advocacy groups and with all levels of government.

Goals	Strategies	Inclusion in Action Plan
To strengthen and embed collaboration between PLAHS and external stakeholders	Identify agencies and other stakeholders that are interested in forming a more formal relationship with PLAHS.	2012-13
	The CEO and the BOM to determine a priority order for establishment of formal agreements.	2012-13
	Establish and document service agreement between PLAHS and other agencies or stakeholders that clearly define the guidelines for the relationship and the responsibilities of each party.	2012-13
	Advocate for, and implement where possible, an increase in the number of external boards that include representation from PLAHS e.g. Matthew Flinders, City Council, schools, hospital	2012-16
To improve the effectiveness of the specific relationship between PLAHS and Port Lincoln Aboriginal Community Council	Establish a Memorandum of Understanding or a service agreement to jointly address community needs.	2012-13
	Promote a positive model of collaborative behaviour to the community by establishing an effective and harmonious working relationship with Port Lincoln Aboriginal Community Council.	2012-16
To improve advocacy for PLAHS at local, state and Commonwealth government levels.		2012-16

Goals	Strategies	Inclusion in Action Plan
To improve the knowledge of workers in other agencies and stakeholders about the cultural needs of the local Aboriginal community,	Arrange mutual staff exchanges between agencies to increase awareness of cultural needs.	2012-13
To improve PLAHS staff knowledge about the services offered, and models of care used, by other agencies that also interact with our client base.	Establish a calendar of interagency meetings with appropriate agencies and other stakeholders.	2012-13
	<p>Every second month invite a representative of another agency to explain the role of their agency to the Whole of Staff meeting</p> <p>The responsibility for driving these meetings is to be allocated and clearly documented by the CEO.</p> <p>The PLAHS staff induction process to be strengthened by the inclusion of sessions that improve awareness of the services offered, and models of care used, by other agencies that also interact with our client base.</p>	<p>2012-13</p> <p>2012-13</p> <p>2012-13</p>

Strategic Priority Nine – Improving perceptions of PLAHS

To promote PLAHS as a leading organisation in the local Aboriginal Community, the wider Aboriginal health sector, and amongst mainstream health service providers.

Goals	Strategies	Inclusion in Action Plan
To ensure that all staff have a knowledge of PLAHS services provision and team roles.	Provide staff education about the roles and service provided by all the teams at PLAHS. Include awareness and knowledge of PLAHS team roles in the staff induction process. Include sessions about both the roles of teams and their current activities in staff meetings.	2012-16
To increase awareness of PLAHS model of care in health networks and the wider community.	Conduct interagency meetings and information sessions for the wider community.	2012-16
To improve client perception of PLAHS as measured by client feedback	Provide effective, relevant, timely and accessible services to the clients. Ensure that the method of collecting feedback makes it easy for clients to provide useful data.	2012-16
To increase client participation in PLAHS program development and implementation.	Community consultation Community volunteering programs	2012-16
To promote PLAHS as an effective and leading organisation in the community by reducing discrimination and harassment	Monitor and remediate any non-compliance with the bullying and harassment policy. Provide cultural awareness training for the wider community.	2012-16
To improve the PLAHS website as a means of promoting a positive image of PLAHS to the Aboriginal and wider community	The web-site should be monitored for both currency and accuracy monthly and edited if required. Inform staff of updates to the website at Whole of Staff meetings.	2012-16

Appendix A Strategic Positioning and Collaboration Plan 2012-16

Introduction

PLAHS offers a high quality and unique range of services in Port Lincoln.

This document outlines how PLAHS wishes to strategically place itself, relative to other health providers in Port Lincoln, over the period 2012-16.

It considers:

- The nature and type of the services we wish to offer our clients
- The services we wish to offer our clients but which need collaboration with other organisations
- The services we wish to have available to our clients but which require PLAHS to refer our clients to other services
- The clients we wish to provide services to.
- The locations we wish to provide service at
- Improving the quality of our service provision
- Caring for and improving the quality of the people associated with PLAHS

Service Delivery at PLAHS

PLAHS will strategically position itself as the health service in Port Lincoln that offers the widest range of services to their client base.

PLAHS will position itself as a major and unique provider of health services in Port Lincoln by providing a health care model that:

- Treats clients holistically
- Provides comprehensive, multi-disciplinary and evidence based Primary Health Care
- Builds the capacity of the clients to self-manage
- Provides a culturally safe environment
- Includes early detection, promotional, preventative and targeted services and interventions
- Includes advocating for the clients with other providers
- Includes advocating for the clients about alleviating the detrimental effects of the social determinants
- Provides care at no charge to the clients (i.e. free or bulk-billed services)

PLAHS will directly provide the following services to clients in the following areas:

- Acute health care
- GP services
- Chronic Disease Management
- Child and Maternal Health Services and Programs
- Early detection Programs
- Health promotion
- Health publicity
- Prevention programs
 - Nunga Kids Cafe
 - Immunisation
 - Substance misuse
- Mental Health
 - Case management
- Social and Emotional Wellbeing
 - Gambling
 - Living skills
 - Parenting skills
 - Youth workers
 - Aged Care
 - Youth leadership
- Family Counseling
 - Individual and Group
 - Grief and Loss
- Hospital Liaison Services
- Drug and Alcohol Services
- Support with PATS
- Other services as external funding allows (e.g. MSOAP)

Collaboration with other Providers

To improve the range or effectiveness of services available to our clients PLAHS will collaborate with the following providers

GP / Specialist Services

Investigator Clinic
Rural Doctors Workforce Agency
Adelaide to Outback

Acute, Chronic Care / Population Health / Prevention

AHCSA
PLHS (Hospital Networks)
DECS
Pharmacists (CTG)
Research Institutions

Child and Maternal Health

CountryHealthSA -AMIC
SAHealth- CYWHS
Parent and Community Engagement (PACE)
DECS

Social and Emotional Well-being

Office of Problem Gambling
FamiliesSA
SAPOL
West Coast Community & Youth Services
Correctional Services
Courts Administration
Attorney General Dept
HousingSA
Dept of Families and Community
NGOs
Aboriginal Family Support Service
PL Family Violence Legal Services
Parent and Community Engagement (PACE)

Mental Health

Eyre Regional Mental Health Services
Dulwich Centre
Child Adolescent Mental Health Services

Drug and Alcohol Services

DASSA

Political Advocacy / Social Determinants of Health

Local government
PLACC
Eyre-AHAC
OATSIH
Medical Local
Aboriginal Elders Group
Native Title Groups
Training Institutions

Referring to other Providers

To improve the range of services available to our clients, PLAHS will refer clients to the following providers

Acute, Chronic Care / Population Health / Prevention

Specialist Services
 Medical
 Optical
 Allied
 Dental Services
Pharmacists (HMR)

Child and Maternal Health

FamiliesSA
CAMHS

Social and Emotional Well-being

West Coast Community & Youth Services
FamiliesSA
HousingSA
Uniting Care Wesley
Community Aged Care Packages
Aged Care Assessment Team

Mental Health

Rural & Remote MHS
CAMHS

Drug and Alcohol Services

DASSA

PLAHS Client Base

PLAHS will strategically position itself as the provider of choice for families and individuals from or associated with the Aboriginal Community of Port Lincoln and surrounding areas.

In order to improve the financial independence of the service in the longer term PLAHS, as a provider of effective and high quality care, will attempt to widen this client base in the 2012-16 period.

The Locations for Service Delivery

PLAHS will strategically position itself as the health provider in Port Lincoln that provides and locates services that are more readily available and more accessible to our clients than any of our competitors.

Both of the properties we own, 19A Oxford Terrace and Haigh Street are centrally located and easily accessible from those areas of Port Lincoln where a majority of our clients live. In addition, the provision of a transport service makes the service even more accessible and available to our clients.

PLAHS is also unique among the Port Lincoln health service with regard to the large number of outreach services we offer our clients. Again this places PLAHS as the most available of the health services. The outreach services include:

- School Screening,
- Camps,
- Mobile Clinic,
- Promotion and community events,
- MPFC,
- MP Gym,
- Home visits

PLAHS recognises that as a Community Controlled Health Service, with many staff that are members of the local Aboriginal Community, it is uniquely placed to be the health provider in Port Lincoln that can provide the most welcoming and cultural appropriate environment for our clients.

PLAHS recognises that as the service continues to grow it may be necessary to further enhance the accessibility and availability of service by redeveloping or expanding our current infrastructure.

PLAHS as a provider of quality health services

PLAHS will strategically place itself as a legitimate, independent self-directing provider of quality health services. PLAHS will be recognised as such by the rest of the health providers across Lower Eyre Peninsula.

PLAHS will be, and will be promoted and recognised as

- A fully accredited health service (RACGP & QIC)
- A provider of a unique model of care
- A provider of high quality population-based services based on the evidence of:
 - best practice guidelines,
 - surveys, audits, and other KPI data,
 - community demographic analysis,
 - evaluations,
 - community and client consultations
- A provider that incorporate continuous improvement methodologies
- A service that formally documents its external relationships via MoUs or agreements
- A service that keeps its clients informed via community newsletters
- A service that provides representation on a number of boards across the health sector of Lower Eyre Peninsula
- A service that regularly reviews all policies, plans and procedures
- A service that has an accountable workforce with clear roles and responsibilities
- A service whose staff have knowledge of and can articulate:
 - PLAHS services, policies, procedures, systems and obligations
 - the limits of the services that PLAHS is able to offer clients
 - other services available to our clients in Port Lincoln

The People of PLAHS

PLAHS will strategically position itself as the health provider in Port Lincoln that does the most to develop the skills and knowledge of the people associated with;

- the governance and administration of the organisation
- service delivery for the organisation

PLAHS will strategically position itself as the health provider in Port Lincoln that does the most to alleviate some of the social, political and economic disadvantages suffered by the Aboriginal community by;

- providing employment for members of the Community
- developing the skills, knowledge, qualifications, sense of responsibilities and accountability of staff members
- being a successful Community Controlled service
- developing the governance skills, knowledge, competencies and abilities of members of the BOM
- providing an Employee Assistance Program
- providing salary sacrificing
- advocating for PLAHS and the local community at local state and national level
- allowing staff to contribute to the progress of PLAHS through a team structure that has clearly defined roles, meeting procedures and terms of reference

Appendix B Asset and Infrastructure Plan 2012 – 2016

FINANCIAL YEAR	WHAT WE WANT TO DO	WHAT NEEDS TO BE DONE	COSTS
2012 – 2013	<p>To develop a master plan for increasing and improving the physical work spaces at PLAHS that includes improving the utilisation of;</p> <ul style="list-style-type: none"> • the existing clinics and offices • the reception area • the upstairs attic area • the space between PLAHS and Oxford Terrace • the Haigh Street premises <p>The plan needs to also take into account the requirement for improved ventilation in the clinics and in other parts of the building.</p> <p>Consult with staff, clients and the wider Port Lincoln Aboriginal Community for ideas and feedback</p>	<p>Consult with builders, architects, council to determine the feasibility of master plan</p>	\$20,000
2012 – 2013	Develop the upstairs attic	<p>Determine the exact functions to be catered for in the redevelopment</p> <p>Contact builder/architect to develop a plan and costing for the redevelopment</p> <p>Apply for funding for redevelopment</p> <p>Roofing will need to be replaced</p>	<p>\$ 20,000.00</p> <p>OATSIH Action Plan 2012-13</p> <p>OATSIH Action Plan 2012-13</p>
2012 – 2013	Redevelop Haigh Street as a multifunction centre	Determine the exact functions to be catered for in the redevelopment	Costs to be determined

FINANCIAL YEAR	WHAT WE WANT TO DO	WHAT NEEDS TO BE DONE	COSTS
2012 – 2013	To improve the layout of the reception area to provide; <ul style="list-style-type: none"> • A more welcoming environment and • A private area for patients who are waiting and who are feeling very unwell 	Determine the exact functions to be catered for in the redevelopment Contact builder/architect to develop a plan and costing for the redevelopment Apply for funding for the redevelopment	Costs to be determined Costs to be determined Costs to be determined
2012 – 2013	To improve ventilation in the clinics and other parts of the building	Contact airconditioning/ventilation specialist Seek quotes for the improvement to the airconditioning/ventilation system Implement improvement to the airconditioning/ventilation system	Costs to be determined Costs to be determined
2012 – 2013	Seek funding for 2 x youth positions	Setting up costs for staff, communicate license, desk, table and computer x 2 On-going wages and on-costs	\$ 16,000.00 \$120,000
2012 – 2013	Driver vehicle replacement	Purchase a new vehicle equipped for disability	\$ 30,000.00
2012 – 2013	SEWB vehicle replacement	Purchase a new vehicle	\$ 20,000.00
2012 – 2013	Apply for funding for a Men's Shed	Set up a men's shed and equipment which could possibly be based at Haigh Street	\$100,000.00
2012 – 2013	Commence the Community Garden Project	Employ 2 x part-time coordinators, purchase equipment and monitor equipment and project On-going wages	\$ 60,000.00 – A once off grant already received ? \$50,000
2012 – 2013	ANF Enterprise Agreement Negotiations	Negotiations will need to be considered	Costs to be determined
2012 – 2013	HSUA Enterprise Agreement Negotiations	Negotiations will need to be considered	Costs to be determined

FINANCIAL YEAR	WHAT WE WANT TO DO	WHAT NEEDS TO BE DONE	COSTS
2013- 2014	Redevelop Haigh Street as a multifunction centre	Contact builder/architect to develop a plan and costing for the redevelopment	Costs to be determined
2013- 2014	To improve the layout of the reception area to provide; <ul style="list-style-type: none"> • A more welcoming environment and • A private area for patients who are waiting and who are feeling very unwell 	Implement the building program – may not be required if approval for attic is done can already use space down stairs	Costs to be determined
2013- 2014	Leased vehicles	Puyu Wanti vehicle lease runs out in September 2013 will PLAHS seek another leased vehicle for driver?	\$ 12,000.00
2013- 2014	SEWB vehicle replacement	Purchase a new vehicle	\$ 20,000.00
2013- 2014	Investigate the setting up of a memorial garden	Seek funding and implement garden	\$ 10,000.00
2014 - 2015	Redevelop Haigh Street as a multifunction centre	Apply for funding for the redevelopment	Costs to be determined
2014 - 2015	Replace computers	Purchase new workstations and associated software	\$ 70,000.00
2015 – 2016	Develop the upstairs attic for more work space	Implement the building program	Costs to be determined
	Redevelop Haigh Street as a multifunction centre	Implement the building program	Costs to be determined
	Replace servers	Purchase new servers	\$ 70,000.00

Appendix C Workforce Plan 2012-2016

To improve the capabilities, qualifications and the effectiveness of the PLAHS workforce.

Goals	Strategies	Action plan	Actions
<i>To improve the effectiveness and accountability of the PLAHS workforce</i>	Develop a statement defining the role of each team.	2012-13	Refer Q:\Policies\Human Resource Management 6.1.1 – 6.1.7. and Senior Management Team Terms of Reference ..\..\..\Policies\Governance\Terms of Reference\Senior ManagementTerms of Reference Ver 1.1.pdf
	Review the suitability of, and compliance with, individual job and person specification and role descriptor at each staff member's annual staff appraisal.	2012-16	To be completed by 2014. Complete all Staff Appraisals as per regular cycle by December 2012. J&P reviews and role descriptors to be additional to the appraisal process with completion date 30 th June 2013.

Goals	Strategies	Action plan	Actions
	<p>Develop an education/ training plan for each staff member. The plan should relate to the staff member's area of work and to the core business of PLAHS. Revise plans annually during staff appraisals.</p> <p>Source increased funding that is specifically allocated to staff training.</p> <p>Involve staff in the development of a PLAHS Staff Code of Conduct.</p>	<p>2012-16</p> <p>As required</p> <p>2012-13</p>	<p>To fit in with staff appraisal process by 31st December 2012. Review of staff appraisal process to be completed by November 2012.</p> <p>To commence July 2012 via consultation with Corporate Services & Client Services SMs. Work out standard costs of required training such as SFA, CPR, CSE etc.</p> <p>Set up a working party to review the Code of Conduct ..\..\..\Policies\Human Resource Management\PLAHS Policy - HR Management.pdf and develop a Staff Charter. The composition of the working party to represent all PLAHS teams.</p>

Goals	Strategies	Action plan	Actions
<i>To improve the effectiveness of Human Resource Planning</i>	<p>To identify, from Strategic and/or Annual plans any additional roles required.</p> <p>Develop, document and annually review a Workforce Plan.</p> <p>Source funding for any additional staff.</p> <p>Review and document the roles, responsibilities and accountabilities of Aboriginal Health Workers in light of their pending registration with the Australian Health Practitioners Registration Authority.</p> <p>Improve succession planning by developing effective documentation to capture the expertise, skills and knowledge of current staff members.</p>	<p>2012-16</p> <p>2012-14</p> <p>2012-14</p> <p>2012-14</p> <p>2013-14</p>	<p>Male and Female Youth Worker – Strategic Plan Aged Care Workers – Strategic Plan Dietician – 2012-13 Action Plan GP – 2012-13 Action Plan</p> <p>Tobacco Program ongoing funding – 2012-13 Action Plan Accreditation Support Officer - 2012-13 EQIS 12 month funding only. Part-time 2 x Co-ordinators for gardening program – Once Off grant.</p> <p>Workforce plan review with Administration Team, to workout format and procedure. Source funding for any additional staff and include in the workforce plan, to look at other external organisations.</p> <p>Aboriginal Health Practitioners working party to continue communication, consultation and development to 2013. Include in HR registrar.</p> <p>Succession Planning - All staff have an update of recent resume have a standard template. Every 18 months have funding body (Commonwealth/State) come and visit PLAHS re update of future funding.</p>
<i>To improve communication and decision-making at PLAHS</i>	Develop a communication protocol based on best practice guidelines.	2012-13	Communication structure to go through Team meetings. Staff emails to be sent re staff on leave or absent from duty. May be added to Monday Wongan. Only relevant matters; none of a confidential manner.
<i>To better utilise the existing Employee Assistance Program</i>	Promote the existing Employee Assistance Program to PLAHS staff and their families.	2012-16	Regular updates to staff. Currently under review

Goals	Strategies	Action plan	Actions
	Annually review of the use and satisfaction with the Employee Assistance Program.		Provider makes stats available annually. Request this quarterly and present updates at All of Staff meeting.