

Port Lincoln Aboriginal Health Service



Strategic Plan 2016/17 to 2020/21

Ratified by BOM April 2016
Version 2.0

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Responsible Officer's Position	Corporate Services Manager
Version of Strategic Plan:	Version 2.0
Date this version was submitted for ratification:	April 2016
Plan ratified by:	Board of Management
Date this version was ratified:	April 2016
Date of Planned Review:	March 2017

This policy has been developed or reviewed in accordance with the PLAHS Policy Development and Review Procedures.

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Signed

Carolyn Miller
Acting CEO, PLAHS
Management

Neville Bilney
Chairperson of the Board of

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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 2016-21. The plan is the result of community, client and staff consultation, an examination of service delivery and outcome data, and planning 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.

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 December 2015 was:

Total number of active clients	1395
• Current	1089
• Transient	306
• Active clients that live in the local 5606 postcode area	1142
• Aboriginal	1269
• Torres Strait Islander	2
• Aboriginal and Torres Strait Islander	17
• Non-ATSI	107

Governance

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

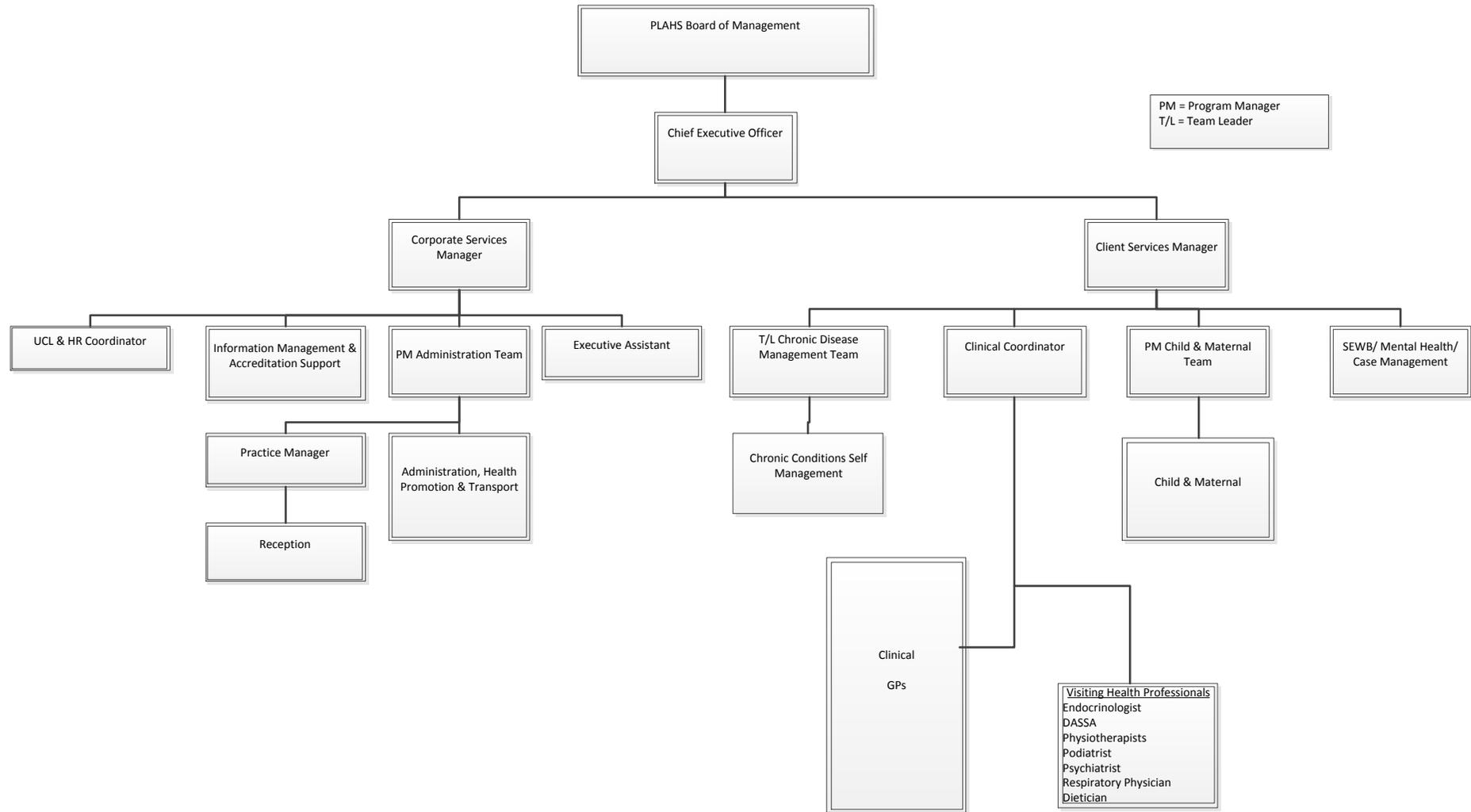
PLAHS is a member of the National Aboriginal Community Controlled Health Organisation (NACCHO) and an affiliate of the Aboriginal Health Council of South Australia (AHCSA).

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 2016 to June 2021

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 eleven strategic priorities for the five years to June 2021.

- 1. 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.*
- 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) and Quality Improvement Council (QIC) accreditation and by securing funding from a range of sources.*
- 4. To deliver clinical programs that address the health needs of the local Aboriginal Community.*
- 5. To develop and deliver programs, in partnership with external agencies, to improve wellbeing and to reduce the harm to individuals, families and the community.*
- 6. To improve the social and emotional wellbeing of the community.*
- 7. To provide community development and engagement opportunities aimed at improving family and community relationships.*
- 8. To explore the needs of aged and/or disabled clients and to ensure that appropriate support is available.*
- 9. To explore the health and other needs of youth in the community and to ensure that appropriate support is available.*
- 10. To develop, document and maintain the relationships between PLAHS and other health service providers, Aboriginal organisations, advocacy groups and all levels of government.*
- 11. 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>Investigator Clinic is vacating their building. This provides a unique opportunity for PLAHS to consolidate all services inside the one building.</p> <p>To investigate if the layout of any expansion into Investigator Clinic provides a sensible and workable improvement to the current building/s.</p> <p>To investigate the opportunity provided considering the options of:</p> <ol style="list-style-type: none"> 1) Sale of the Haigh Street premise 2) Buy or rent the old Investigator Clinic rooms either solely or with a compatible service provider 3) Redevelopment of the attic area and/or Haigh Street as an alternative development <p>To investigate possible funding for the purchase/rent/redevelopment.</p>	<ul style="list-style-type: none"> • Establish a working party including at least two senior managers and two BOM members to consider the possibilities. 	<p>2016-17</p>

Goals	Strategies	Inclusion in Action Plan
<p>Regardless of outcome of the above investigation develop a long term master plan for the physical infrastructure for PLAHS that meets the requirements of:</p> <ul style="list-style-type: none"> • predicted continuing growth • health needs of the Community • staff and community training • community meeting space • privacy and confidentiality • staff recreational areas • administration 	<ul style="list-style-type: none"> • Consult with staff, clients and the wider Port Lincoln Aboriginal Community for ideas and feedback. • Risk assessment and environmental impact to be part of the planning process • Consult with builders, architects, council to determine the feasibility of master plan 	2016-18
<p>To investigate improvements to the current technology communications infrastructure to allow for</p> <ol style="list-style-type: none"> 1) more flexible location and times of service delivery 2) alternative means of communication with clients and the broader community 	<ul style="list-style-type: none"> • Consult with staff, clients and the wider Port Lincoln Aboriginal Community for ideas and feedback. • Consult with IT and telecommunication providers to determine the feasibility of possible improvements. 	2016-18

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 allocate specific and, as equal as practical, professional development funds and time for every staff member each year.	<ul style="list-style-type: none"> Update policy and procedures to reflect this goal and include in PWP's. Implement training in the work place relevant to their role. 	2016-17
Supplement current accredited and non-accredited training opportunities by utilising in-house or visiting medical professionals to update and consolidate skills required for everyday program delivery.	<ul style="list-style-type: none"> Ensure that dedicated staff training times are allocated into the calendar on a periodic and consistent basis. 	2016-21
To improve the PLAHS workforce	<ul style="list-style-type: none"> Personal Work Plans to incorporate more specific details of designated roles and responsibilities 	2016-21
To reduce perceptions of bullying and harassment in the workforce.	<ul style="list-style-type: none"> Any reports of bullying and harassment to be reported to Senior Management according to procedure. SMT to take responsibility for ensuring that any reported case of bullying or harassment is addressed and the resolution reported back to relevant parties. Discuss and develop strategies for addressing this issue in the workplace. 	2016-21
To improve staff morale and communication through team building events and activities	<ul style="list-style-type: none"> Healthy Minds Program – set up working party Healthy Minds Concept – Cultural Safety Charter, Employee Assistance Program 	2016-17

Strategic Priority Three – Maximising sustainability

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

Goals	Strategies	Inclusion in Action Plan
To retain RACGP accreditation	<ul style="list-style-type: none"> • To maintain an accreditation support officer • Develop, maintain and update policies, procedures, role definitions, delegations and accountabilities • Maintain and monitor all required registers • Conduct all required audits and other required QI activities • Establish, document and monitor our continuous improvement activities • Document maintain and monitor adherence to all required systems 	2016-21
To retain QIC accreditation.	<ul style="list-style-type: none"> • To maintain accreditation support officer • Develop, maintain and update policies, procedures, role definitions, delegations and accountabilities • Maintain and monitor all required registers • Conduct all required audits and other required QI activities • Establish, document and monitor our continuous improvement activities • Document maintain and monitor adherence to all required systems 	2016-21

Goals	Strategies	Inclusion in Action Plan
To retain funding through DOH and ongoing funding through Prime Minister and Cabinet, CHSA, Country PHNSA and other funding streams for PLAHS to maintain a holistic primary health care service.	<ul style="list-style-type: none"> • Continuously improve the monitoring and achievement of KPIs. • Comply with all deadlines associated with reporting requirements. • Comply with all deadlines associated with plan submissions. • Investigate audit reporting from Special purpose audit to General Purpose in line with ACNC reporting annually. 	2016-21
To investigate other potential funding bodies. To apply for any such funding that supports the goals of PLAHS Strategic Plan.	<ul style="list-style-type: none"> • Evidence-based information 	2016-21

Strategic Priority Four – Provision of effective clinical services

To deliver clinical programs that address the health needs of the local Aboriginal Community.

Goals	Strategies	Inclusion in Action Plan
<p>To continue to provide the current range of clinical services.</p> <ul style="list-style-type: none"> • Acute care • Health assessments • Chronic conditions self-management • Child and maternal health care • Immunisation • Antenatal care • Drugs, Alcohol, Smoking • Gambling • Mental Health • Dental • Allied Health Services • Specialist clinics • Respiratory services 	<ul style="list-style-type: none"> • Provision of services • Measure provision and effectiveness of service delivery using: <ul style="list-style-type: none"> ○ Periodic review of KPIs and other data as required ○ Meeting all reporting requirements 	<p>2016-21</p>
<p>To improve chronic conditions, through effective, preventative and self-management strategies</p>	<ul style="list-style-type: none"> • Utilise Healthy Lifestyle Program e.g. walking groups • Ensure continued visiting by Allied Health Professionals and Specialists 	<p>2016-17</p>

Goals	Strategies	Inclusion in Action Plan
	<ul style="list-style-type: none"> • Promote healthy lifestyles as a core priority • Establish and maintain team care arrangements to utilise the skills and knowledge of staff, allied health professionals and specialists • Encourage PLAHS staff to role model improved lifestyle by encouraging regular Adult Health Assessments and Immunisations • Track progress by monitoring population level trends in: <ul style="list-style-type: none"> ○ Obesity ○ Blood pressure ○ Diabetic control ○ Cholesterol • Use of alcohol, tobacco, and THC and other substances 	2016-21
Improve service delivery in the home and in community settings	<ul style="list-style-type: none"> • Introduce GP home visit consults as assessed by clinical management • Coordinate home and community visits by SEWB, CCSM, C&MH and Health teams as assessed by Team Leader/Program Manager 	2016-17
	<ul style="list-style-type: none"> • Monitor the number of home and community visits monthly • Report in BOM reports 	2016-21

Goals	Strategies	Inclusion in Action Plan
Improve the management of joint and other pain	<ul style="list-style-type: none"> • Utilise visiting physiotherapists to develop pain management programs • Assist clients to manage the non-physical aspects of pain e.g. spiritual, psychological and cultural • Encourage and assist clients to maintain healthy lifestyles • Monitor by measuring <ul style="list-style-type: none"> ○ Client wellbeing ○ Use of services ○ Relevant clinical data 	2016-21
Employ our own GP	<ul style="list-style-type: none"> • Monitor GP sessions and Medicare income • Secure funding to employ our own GP • Undertake recruitment of GP 	2016-21
Retain Registrar placement/position	<ul style="list-style-type: none"> • Monitor GP sessions and Medicare income • Maintain relationship with GPEx 	2016-21
Maintain current GP sessions with gender and skill mix	<ul style="list-style-type: none"> • Monitor GP sessions and Medicare income • Finalise GP contracts 	2016-21 2016-17

Strategic Priority Five – Promoting healthier lifestyles

To develop and deliver programs, in partnership with external agencies, to improve wellbeing and to reduce the harm to individuals, families and the community.

Goals	Strategies	Inclusion in Action Plan
To utilise the expertise of visiting allied health workers and external service providers to develop health promoting programs that are suitable for our community.	<ul style="list-style-type: none"> • Community survey to determine priorities • Assessment of clients • Analyse data to determine the extent of issues 	2016-17
To utilise a primary health care approach that is evidence based and best practice.	<ul style="list-style-type: none"> • Research • Establish criteria for on-going support and access to programs 	2016-17
	<ul style="list-style-type: none"> • Review outcomes of program quarterly and continuously improve program as indicated by results and feedback 	2016-21
To provide training for PLAHS staff involved in the programs	<ul style="list-style-type: none"> • General training on the program and the community, family and individual approach • Specific training as required to help staff perform their role 	2016-21
Promote the existence of the programs and activities to the Aboriginal community using a variety of media.	<ul style="list-style-type: none"> • Radio, television, newspaper, website, Facebook 	2016-21
To develop and deliver Healthy Lifestyle Program	<ul style="list-style-type: none"> • Secure funding for Healthy Lifestyle Program • Retain Healthy Lifestyle Worker position to coordinate the delivery of the program • Link in with internal and external agencies/services 	2016-17 2016-21

Goals	Strategies	Inclusion in Action Plan
In collaboration with other appropriate services, provide community education and activities	<ul style="list-style-type: none"> • Establish and maintain MOUs with other agencies • Link in with external agencies/services/programs to avoid duplication 	2016-21
Collaborate with other appropriate agencies to provide individual case management.	<ul style="list-style-type: none"> • Establish close links, service agreements or MoUs with other agencies • Ensure all privacy and confidentiality issues are addressed. 	2016-21

Strategic Priority Six – Addressing social, emotional and mental wellbeing

To improve the social and emotional wellbeing of the community.

Goals	Strategies	Inclusion in Action Plan
To determine, as perceived by the community, the priority order of SEWB issues	<ul style="list-style-type: none"> • Annual community consultations • Consultation with other Mental Health and Wellbeing services and professionals e.g. attending Interagency Meetings • Data analysis 	2016-21
To provide holistic SEWB services	<ul style="list-style-type: none"> • Retain sufficient staffing as required. • Ensure that staff have received appropriate training • Raise awareness of issues and the holistic service model with all staff • Utilise appropriate models of care including case management • Integrate service delivery with other service providers 	2016-21
To improve the capacity of individuals and the community to cope with the negative impacts of grief and loss	<ul style="list-style-type: none"> • While these processes and a community driven support group are in place PLAHS should ensure that: <ul style="list-style-type: none"> ○ Staff and resources are available to support the group when required ○ The community driven monthly meetings continue ○ The group can link with other services to prevent duplication. 	2016-21

Strategic Priority Seven – Improving family and community relationships

To provide community development and engagement opportunities aimed at improving family and community relationships.

Goals	Strategies	Inclusion in Action Plan
Provide, promote, maintain or establish new and appropriate parenting programs by working collaboratively, both within PLAHS, and with other stakeholders.	<ul style="list-style-type: none"> • Parenting groups for mothers and fathers, grandparents and extended family ensuring that these groups are scheduled on a regular basis • Provide parents with access to input from allied health professionals e.g. dieticians • Establish required links, service agreements or MoUs with other service providers • Use referrals systems to ensure that parents get access to services required. • Survey parents periodically to ensure that the programs are meeting their needs. 	2016-21
Strengthen and enhance relationships with community groups (Aboriginal and non-Aboriginal) and other stakeholders and/or agencies.	<ul style="list-style-type: none"> • Establish regular meetings with all stakeholders and ensure that PLAHS representatives are available to attend. • Ensure that feedback from community groups and other stakeholders is recorded and acted on. • Develop simple and effective communication strategies both within PLAHS and with other stakeholders. 	2016-21

Strategic Priority Eight – Addressing the needs of the aged clients and/or clients with disabilities

To explore the needs of aged and/or disabled clients and to ensure that appropriate support is available.

Goals	Strategies	Inclusion in Action Plan
<p>To develop and implement an aged care and/or disability support program. The program should aim to ensure that there is a consistent and cohesive system of pathways and service delivery. This care should be in line with individual client need and be flexible enough to adapt to changing health needs.</p>	<ul style="list-style-type: none"> • Consultation with Elders’ group • Consultation with other aged care and disability service providers • Research best practice • Develop a model of care, coordination and advocacy 	2016-17
	<ul style="list-style-type: none"> • Secure funding to provide coordinated aged and/or disabled program/s at PLAHS • Staff training • Employ an AHW to provide coordination, services and advocacy for aged and/or disabled clients • Strengthen links with other providers and establish MoUs or service agreements where appropriate • Establish appropriate communications and IT links with other collaborating service providers. • Establish, monitor and act on feedback systems 	2016-21
	<ul style="list-style-type: none"> • Explore the provision of PLAHS run aged care facility 	2020-21

Strategic Priority Nine – Addressing the needs of youth

To explore the health and other needs of youth in the community and to ensure that appropriate support is available.

Goals	Strategies	Inclusion in Action Plan
To develop and establish programs aimed at youth to encourage a positive transition to adulthood.	<ul style="list-style-type: none"> • Consultation with youth in the community • Establish a directory of youth services in Port Lincoln • Consultation with other providers of services targeted at youth • Research best practice • Develop a model of care, coordination and advocacy • Lobby to Medicare to develop a holistic Youth Health Screening Tool 	2016-17
	<ul style="list-style-type: none"> • Seek funding for male and female youth based AHWs 	2017-18
	<ul style="list-style-type: none"> • Staff training • Strengthen links with other providers and establish MoUs or service agreements where appropriate • Strengthen links with Elders’ group and other possible mentors • Establish appropriate communications and IT links with other collaborating service providers. • Establish, monitor and act on feedback systems 	2018-21

Strategic Priority Ten – Improving collaboration and advocacy

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

Goals	Strategies	Inclusion in Action Plan
To strengthen and embed collaboration between PLAHS and external stakeholders	<ul style="list-style-type: none"> • Review the Strategic Positioning document annually and update the list of agencies and other stakeholders that are interested in forming more formal relationships with PLAHS. • The CEO and the BOM to determine a priority order for establishment of any formal agreements. • Maintain and update service agreements between PLAHS and other agencies or stakeholders that clearly define the guidelines for the relationship and the responsibilities of each party. 	2016-21
To improve the effectiveness of the specific relationship between PLAHS and Port Lincoln Aboriginal Community Council	<ul style="list-style-type: none"> • Establish a Memorandum of Understanding or a service agreement to jointly address community needs. • Promote a positive model of collaborative behaviour to the community by establishing an effective and harmonious working relationship with Port Lincoln Aboriginal Community Council. 	2016-21

Goals	Strategies	Inclusion in Action Plan
To promote and improve advocacy for PLAHS at local, state and Commonwealth government levels.	<ul style="list-style-type: none"> • Establish and maintain MOUs/Service Agreements with external service providers, local, state and Commonwealth government agencies • Representatives on external committees to provide feedback to Board of Management • Board of Management to provide feedback to SMT 	2016-21
To improve the knowledge of other agencies and stakeholders about the cultural needs of the local Aboriginal community.	<ul style="list-style-type: none"> • Arrange interagency meetings to increase awareness of cultural needs. • Deliver Interactive Ochre Cultural Awareness Training to external services. 	2016-21
To improve the knowledge about the services offered, and models of care used, by other agencies that also interact with our client base.	<ul style="list-style-type: none"> • Record interagency meetings in the interagency meeting register • As required- invite representatives of another agency to explain the role of their agency to the Whole of Staff meeting and/or other forums at PLAHS 	2016-21

Strategic Priority Eleven – 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
<p>To ensure that all staff and BOM members have a clear understanding and knowledge of:</p> <ol style="list-style-type: none"> 1) services PLAHS provides and 2) the role of the teams at PLAHS 	<ul style="list-style-type: none"> • Include awareness and knowledge of PLAHS team roles in both the staff and BOM induction processes. • Include sessions about both the roles of teams and their current activities in both staff and BOM meetings. • Maintain updated team information in the HR Policy document, Staff and BOM Handbooks. 	2016-21
<p>To increase awareness of PLAHS model of care in health networks and the wider community.</p>	<ul style="list-style-type: none"> • Develop and periodically update presentations on the roles and responsibilities of each team. Presentations could utilise a range of media including PowerPoint, video, physical display materials, Facebook Page and Website. • Conduct interagency meetings and information sessions for the wider community. • Encourage exchange and mentoring programs between PLAHS and other service providers. • Measure awareness via client, community and external provider surveys 	2016-21
<p>To improve client perception of PLAHS as measured by client feedback</p>	<ul style="list-style-type: none"> • Provide effective, relevant, timely and accessible services to clients. • Ensure that the method of collecting feedback makes it easy for clients to provide useful data and free responses. • Ensure that data from surveys is communicated back to the relevant audience via newsletter or other suitable means. 	2016-21

Goals	Strategies	Inclusion in Action Plan
To increase client participation in PLAHS program development and implementation.	<ul style="list-style-type: none"> • Conduct annual surveys of clients, community and external provider as well as annual community consultations 	2016-21
<p>To improve and update the PLAHS website and Facebook page on a regular basis as a means of promoting:</p> <ol style="list-style-type: none"> 1) The programs provided by PLAHS 2) The roles and responsibilities of the teams at PLAHS 3) A positive image of PLAHS to the Aboriginal and wider community 	<ul style="list-style-type: none"> • The web-site and Facebook page should be monitored for both currency and accuracy monthly and edited if required. 	2016-21