

Collaborative Partnership Agreement

between

**YERIN
ABORIGINAL
HEALTH
SERVICES INC**

AND

**CENTRAL
COAST NSW
MEDICARE
LOCAL**

AND

**CENTRAL
COAST LOCAL
HEALTH
DISTRICT**

*(Trading as Eleanor
Duncan Aboriginal
Health Centre)*
ABN: 20 919 038 891

ABN: 53 108 411 570

ABN: 88 523 389 096

2013



Yerin Aboriginal Health Service Inc:
Auspices



Health
Central Coast
Local Health District



1. Purpose of the Agreement

- 1.1 This 'Partnership Agreement' (the Agreement) outlines a relationship of cooperation between Yerin Aboriginal Health Services Inc (Yerin), Central Coast NSW Medicare Local (CCNSWML) and Central Coast Local Health District (CCLHD) to create a better primary health care system for the local Aboriginal community.
- 1.2 The main objective of this Agreement is for Yerin, CCNSWML and CCLHD to work collaboratively to connect care for the local Aboriginal community, with the right health services, in the right place, at the right time and with the right provider.
- 1.3 For Aboriginal patients on the NSW Central Coast, this means our three organisations will work together to achieve a locally focussed health care system that is patient and consumer centred, easier to navigate, and provides better access to primary health care services and General Practice through collaborative work.

- 1.4 The Agreement sets out to achieve the best possible use of resources for the benefit of the Aboriginal community, and is based on the recognition that primary health care and its interface with secondary and tertiary health care is pivotal to the health system.
- 1.5 This Agreement sets the framework for all collaborative work between the parties. A governance process will be established to oversee the Agreement and agreed work priorities, and oversee the projects that are adopted under this Agreement. Specific service level agreements or similar structures may be developed for projects or similar purposes but they will link back to this Agreement. The anticipated benefits of such a collaborative structure are:
 - 1.5.1 Promotion of health and wellbeing;
 - 1.5.2 Better health outcomes;
 - 1.5.3 Improved coordination and delivery of healthcare;
 - 1.5.4 Reduction in health inequalities and better access to health services for all groups; and
 - 1.5.5 Better utilisation of resources.
- 1.6 Each party acknowledges and respects the other party's role in the local health care system.





2. The members of this Agreement

2.1 Yerin Aboriginal Health Services Inc (Yerin)

Several years ago the Central Coast Aboriginal Health Action Group was formed.

One of the main aims of this group was to secure funding for culturally appropriate Aboriginal health services on the Central Coast. The Health Action group approached the then Central Coast Division of General Practice for assistance in the securing of funding to set up an Aboriginal health service. In April 1995 the Division of General Practice gave the Central Coast Aboriginal Health Group a grant to help set up the Health Centre. General Practitioners from the Division offered to help with the provision of services at the Centre. It was decided to call the Centre the Eleanor Duncan Aboriginal Health Centre in honour of Eleanor Duncan who was a well-respected member of the local Aboriginal Community. Eleanor was a registered nurse, who completed her training at both Moree and Narrabri District Hospitals. Eleanor was just one of thousands of Aboriginal people who suffered from poor health outcomes and unfortunately became one of many health statistics for Aboriginal people, passing at the early age of 48.

Yerin Aboriginal Health Services Inc was incorporated in February, 1996 and is the auspicing organisation of the Eleanor Duncan Aboriginal Health Centre. Yerin is a member of the Aboriginal Health and Medical Research Council of NSW (AH&MRC) and the National Aboriginal Community Controlled Health Organisation (NACCHO). These are the NSW and national peak Aboriginal Community Controlled Health Organisations.

Yerin will work collaboratively with our members, patients and key stakeholders with our endeavours driven by the following guiding principles:

- Concepts of health as holistic;
- Recognition of the centrality of kinship;
- The right of self-determination;
- Recognition of different communities and needs;
- The impact of history in trauma and loss;
- Recognition of Aboriginal strengths and skills;
- The need for cultural understanding;
- Universal access to basic health care;
- The recognition of human rights;
- High quality health care services;
- The impact of racism and stigma; and
- Equitable funding for health care

2.1.1 Yerin's strategic priorities are as follows:

- a) To promote Yerin as the lead organisation in the design, development and delivery of comprehensive culturally appropriate primary health care;
- b) To ensure Yerin is a high performing and effective service that delivers culturally appropriate comprehensive primary health care through innovation; and
- c) To build the capacity of Yerin to manage and deliver sustainable and relevant health and health related services.



2.2 Central Coast NSW Medicare Local (CCNSWML)

In July 2004 the Central Coast Division of General Practice (now known as Central Coast NSW Medicare Local) commenced trading as a not-for-profit company limited by guarantee. The change was part of a review of the corporate governance of the organisation which also included amendments to the Constitution.

The Medicare Locals Program was established in 2011 by the Commonwealth Department of Health and Ageing as part of its General Practice Strategy. The Central Coast NSW Medicare Local was constituted in 1 July 2012. Medicare Locals are non-for-profit organisations that were developed to enhance communication and integration between GPs and the wider health system. They have since evolved and now also aim to improve the health of the community by encouraging GP collaboration with other health professionals in the delivery of quality health care. Over 90% of GPs are members of their Medicare Local.

Medicare Locals make a significant contribution to the primary health care system in Australia. They are respected agents of change, building the capacity of general practices; forging and maintaining strong links with both health care providers and consumers; and offering the foundation from which primary care services can be coordinated and / or delivered in response to community need. The Medicare Locals network, with its local knowledge and connections, is positioned to play a vital role in strengthening our primary care system.

The Medicare Local's operation is governed by its Constitution. The Board owes a duty of care to members of the Medicare Local and has contractual obligations to the Australian Government Department of Health and Ageing and other funding bodies on behalf of that membership.

Our objectives are:

1. Improving the patient journey through developing integrated and coordinated services;
2. Provide support to clinicians and service providers to improve patient care;
3. Identification of the health needs of local areas and development of locally focused and responsive services;
4. Facilitation of the implementation and successful performance of primary health care initiatives and programs; and
5. Be efficient and accountable with strong governance and effective management.

2.3 Central Coast Local Health District (CCLHD)

CCLHD provides a range of services for the Central Coast Aboriginal community, continues to promote the employment of Aboriginal people, and supports traineeships and cadetships in the workplace.

Nunyara Aboriginal Health Unit

Nunyara provides a focus for health services for Aboriginal people in CCLHD, a focus for Aboriginal health workers in CCLHD, and a voice for Aboriginal people using any of the services provided by CCLHD. Over the years, Nunyara has been active in seeing Aboriginal Health workers placed in a range of health services and programs. The Unit currently provides services through its Aboriginal Hospital Liaison Officer and the Aboriginal Chronic Care Team. The Chronic Care Team are active across a range of chronic diseases, working to link Aboriginal people who have been in hospital with services in the community setting, e.g. the 48-hour follow-up initiative.



Other Community Services Specifically Developed for the Aboriginal Community

These community services include Child & Family (Ngiyang Mothers and Babies); Mental Health; Youth Health; Drug & Alcohol; Sexual Health; Oral Health (adults and children); NAIDOC Day event and Community Nursing.

Across these programs, CCLHD staff have links with external non-health services, including Mingaletta, Bungree, The Glen, Youth Connections, BreakThru, New Horizons, Coast Shelter, Samaritans, Education and Training, Juvenile Justice and Community Services.

Our 'CORE' values are:

Collaboration, Openness, Respect and Empowerment.

Our Strategic Priorities are:

Our patients: Provide best practice care to ensure patient safety and satisfaction;

Our staff: Support and develop our most important resource and provide a safe and rewarding workplace;

Our resources: Use resources effectively and efficiently;

Our community: Invest in better health by promoting a healthy lifestyle and available health services; and

Our future: Develop strong and effective partnerships to meet the community's health needs.



3. Principles and Goals

3.1. This Agreement is based on the following:

- The health of the Aboriginal community is a national priority;
- Improved health outcomes for the Aboriginal community will be achieved when they and their health services are empowered to act on their own behalf, and when access to relevant and culturally appropriate services are readily available;
- Recognition of Aboriginal self-determination and a collaborative approach are fundamental to the achievement of improved health outcomes;
- Individual health is closely related to the general wellbeing of communities, thus calling for a holistic health approach;
- Mutual respect of each other's role, goals and culture; and
- This Partnership Agreement serves to guide activities relating to Yerin, CCNSWML and CCLHD in 'closing the gap' for health inequities for the local Aboriginal community.

3.2 The parties will work together on the NSW Central Coast to:

- 3.2.1 Develop programs to promote health and reduce the rising epidemic of chronic disease within the local Aboriginal community;
- 3.2.2 Develop an integrated approach to primary health care and acute hospital based care, meeting the needs of the local Aboriginal community;
- 3.2.3 Develop ways to engage Aboriginal patients, carers and other consumers in the design and monitoring of health services;
- 3.2.4 Seek the best achievable service delivery from available resources to meet the identified needs of the Aboriginal community;
- 3.2.5 Cooperate in seeking additional resources required to address identified needs of the Aboriginal community;
- 3.2.6 Determine common local health outcomes for the Aboriginal community;
- 3.2.7 Support each other in the development of projects; and
- 3.2.8 Participate in training and development initiatives, e.g. inter-organisation secondments.

4. Aboriginal Health Services Plan

This Partnership Agreement shall be read in connection with the jointly developed Aboriginal Health Services Plan.

- 4.1 In order to practically implement the objectives and responsibilities in this Agreement, Yerin, CCNSWML and CCLHD shall establish a Central Coast Aboriginal Health Partnership Committee to develop, implement and monitor the Aboriginal Health Services Plan. All three organisations shall appoint members to the Central Coast Aboriginal Health Partnership Committee.
- 4.2 The parties will commit dedicated staff and resources to be used for agreed joint activities.

5. Central Coast Aboriginal Health Partnership Committee

- 5.1 Yerin, CCNSWML and CCLHD shall ensure that they appoint relevant members to the Central Coast Aboriginal Health Partnership Committee in accordance with the requirements as set out in the Aboriginal Health Services Plan; and
- 5.2 The members appointed to the Central Coast Aboriginal Health Partnership Committee shall be required to attend meetings and adhere to the responsibilities set out in the Central Coast Aboriginal Health Services Plan.



6. Roles and Responsibilities

- 6.1 The specific roles and responsibilities of Yerin, CCNSWML and CCLHD will be set out in separate Plans to be developed as required. However, in relation to this Partnership Agreement, the parties jointly agree to:
 - 6.1.1 Work collaboratively to improve the health of local Aboriginal people, their families and communities through the establishment of an Aboriginal Health Partnership Committee;
 - 6.1.2 Develop culturally appropriate strategies to encourage Aboriginal participation in the health care system, to raise health as a priority in their lives and to take responsibility for their own health;
 - 6.1.3 Consider strategies to encourage Aboriginal employment within Yerin, CCNSWML and CCLHD as well as other local primary health care organisations;
 - 6.1.4 Work collaboratively to provide pathways of care;
 - 6.1.5 Establish mechanisms for information exchange, consultation and collaboration on Aboriginal health matters of mutual interest; and
 - 6.1.6 Circulate and collect appropriate data/information and other material to ensure wide dissemination of knowledge with regard to improving the health and wellbeing of the Aboriginal community.

7. Intellectual Property

- 7.1 Yerin, CCNSWML and CCLHD retain all intellectual property rights to the intellectual property created by the respective parties prior to this Agreement.
- 7.2 Any intellectual property jointly created by Yerin, CCNSWML and CCLHD working together under the auspices of this Agreement will be the joint property of Yerin, CCNSWML and CCLHD.

8. Conflict resolution

- 8.1 In the event that a conflict or disagreement arises in respect of this Agreement or any projects or other work undertaken under the auspices of this Agreement, Yerin, CCNSWML and CCLHD hereby agree to meet and seek in good faith to resolve the conflict or disagreement in a timely manner and keep the dispute confidential and between the respective organisations only;
- 8.2 Where a conflict remains unresolved, the dispute shall be referred to the relevant Board Chairs for dispute resolution; and
- 8.3 Following discussion at the above clause, should resolution still not be possible, an independent mediator acceptable to both parties shall be appointed.



9. Review of Agreement

- 9.1 This Agreement will stand until superseded or changed in writing and signed by the parties and will be reviewed as required at least every three (3) years for its currency and relevance;
- 9.2 Notwithstanding any other clause in this Agreement, any party may withdraw from this Agreement by serving one month's notice in writing to all other parties. Such withdrawal will not affect any other agreement that may exist between any or all of the parties and the Agreement will continue to hold for the remaining parties who do not withdraw;
- 9.3 This Agreement is not legally binding; and
- 9.4 We hereby commit to a formal collaborative structure between Yerin, CCNSWML and CCLHD that is based on the above.

11. Signatories to this Agreement

Signed by Yerin Aboriginal Health Services Inc
ABN: 20 919 038 891

Chair *VAParry*

Dated 5/7/2013

AND

Signed by Central Coast NSW Medicare Local
ABN: 53 108 411 570

Chair *DeJure*

Dated 5/7/2013

AND

Signed by Central Coast Local Health District
ABN: 88 523 389 096

Chair *John*

Dated 5/7/2013

We would like to acknowledge The Haven Education Centre, Terrigal, Yerin Aboriginal Health Services, Central Coast NSW Medicare Local and Central Coast Local Health District for their help in developing this agreement.



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