

Hotel Grand Chancellor Hobart, Tasmania



Comprehensive primary health care within Aboriginal **Community Controlled Health Services**

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Lisa will give a Welcome to Country in palawa kani the Tasmanian Aboriginal language.

Introductions.

Lisa Coulson is the Tasmanian Aboriginal Centre's Northern Regional Manager. Lisa has managed the Aboriginal Health Services and programs delivered from the Launceston and Burnie regional offices for 9 years.

Doctor Diane Hopper is a GP based in the Hobart Aboriginal Health Service and is the State-wide Medical Director for the Tasmanian Aboriginal Centres, Aboriginal Health Services.

This presentation will present on Tasmanian Aboriginal Health Services' delivery of Comprehensive Primary Health Care.

A team care approach provides clients with comprehensive primary health care. General Practitioners (GPs) and Registered Nurses (RNs) are supported by Aboriginal Health Workers (AHWs), who as Aboriginal community members have knowledge and strong connections within the community.

The health workers provide an important link between clinical practitioners and the community and support building of trusting relationships between clients and medical professionals, especially where clients have had negative experiences in the past.

AHWs provide clinical staff with family information and back ground that may not be covered in the patient's notes. They also support patients to attend appointments by providing transport and support at appointments. AHW's also home visit patients to follow up nonattendance at appointments, provide emotional support, education and encouragement to the patient.

Aboriginal Health Checks (AHC's) are started by the AHW prior to completion by the GP. Again the relationship between AHW's and patient's supports positive engagement in the AHC, enabling early detection and comprehensive follow up care.

An AHW and GP based in the Launceston Aboriginal Health Service (AHS) complete monthly home visits to clients identified as high risk but for whom barriers exist inhibiting their access to health care. The home visits have been hugely successful in supporting the patients to attend clinical

appointments at the AHS and specialist services. The AHW has been successful in gaining access to patients whom the GP would otherwise not have had.

Health promotion activities such as walking groups, cooking classes and men's groups provide safe and supportive opportunities for health professionals to open discussions with clients about their health needs and gently explore the client's needs and support referral to relevant professionals.

We have had very positive results from working with Aboriginal men in Men's Groups in particular with the AHW engaging 3 men in Alcohol and Other Drug detox and rehabilitation.

Health practitioners within Tasmanian Aboriginal Health services, access internal referral pathways including Midwives, Child Health Nurses, Counsellors, Child Psychologists, Paediatricians Physiotherapists and Diabetes Educators. Staff also refer patients to outside services not provided internally.

There are strong connections between clinical services and heritage and cultural programs for clients accessing Tasmanian Aboriginal Centre programs and the AHS. The palawa kani language and rrala milaythina-ti, Strong on Country programs have supported connections and improved social and emotional wellbeing outcomes for patients. The title of the project captures the links between our community, our country, and the emotional and social wellbeing of each of us and our community.

There are many celebrations throughout the Tasmanian Aboriginal community calendar supporting connections to community. The putalina Festival, Preminghana camp and Generation Cup provide community with opportunities to be together and for some these events provide contact with family members from around the state they may not see at any other time of the year. These events are opportunities for health staff to deliver health promotion programs in a social environment.

As an example of how this approach produces outcomes Dr Diane Hopper will talk about Hepatitis C treatment at the Aboriginal Health Service

Since the new treatments for Hepatitis C were subsidised by Medicare in 2016 the Tasmanian Aboriginal Health Service has taken a pro-active approach to detecting and treating cases of Hepatitis C. This approach has been very successful and the Community is aiming to be Hepatitis C free in the not too distant future.

The important features of our approach are:

- non-judgemental
- community awareness raising including prevention
- all staff involved- approach to the client made by the staff member with the trusting relationship with the client
- as few steps as possible prior to treatment with prescribing by our GPs where-ever possible
- using a database with regular reviews to make sure nobody was missed including follow up and liaison for those clients going in and out of prison.
- support from secondary care.

GPs are able to prescribe the Hepatitis C treatments, Direct Acting Antivirals (DAA), with a Medicare subsidy for uncomplicated patients who do not have cirrhosis (non-reversible liver damage) with the agreement of a specialist. Blood tests and a measure of cirrhosis (by ultrasound) are required prior to treatment.

There was an interesting difference in the approach of secondary care to GP prescribing of DAAs across our regions. In one region secondary care was very proactive at involving GPs and supporting them to prescribe. In this region we very rapidly treated the vast majority of our patients leaving a few 'hard to reach' patients.

Only one patient required referral to secondary care and was successfully treated there.

In the other two regions there was a much slower response to GP prescribing and a reluctance to allow other measures of liver cirrhosis other than the gold standard 'Fibroscan' which was only available in secondary care in Tasmania. This effectively meant that treatment was still only available from specialist clinics. When this was recognised as a significant barrier the local liver clinic in one area was invited to provide a Fibroscan clinic at the Health Service (Healthy Liver Day). Several patients accessed treatment following this event however overall there are still many more patients who have not accessed treatment in this region.

I see this pattern repeated in so many other areas: when the system supports the Community and those with an ongoing relationship to provide healthcare the outcomes are better. Up skilling and confidence building is what's needed.

Presenters

Lisa Coulson has over 25 years' experience in the not-for-profit community sector within Aboriginal health, early years education, aged care and youth services. In her current role as North-North West Regional Manager of the Tasmanian Aboriginal Centre, Lisa manages a range of programs supporting Aboriginal community members to achieve improved health and wellbeing outcomes, build stronger connections within community and connections to culture and country. Lisa has extensive experience in supporting Aboriginal families engaged in the child protection system to build on parenting skills and supporting reunification with family for children in out of home care.

Dr Diane Hopper is GP and Medical Director at the Aboriginal Health Service in Tasmania.