

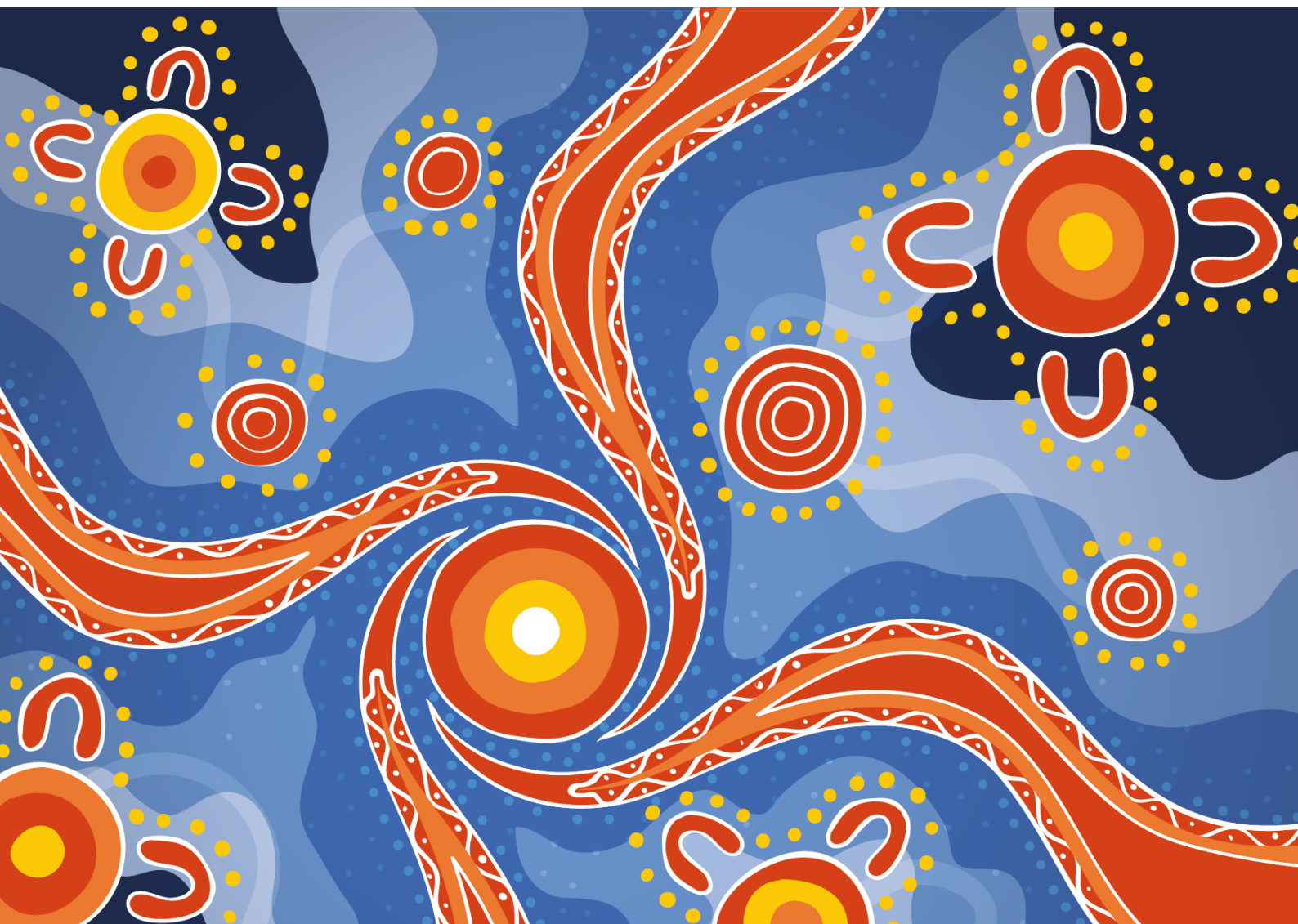


Aboriginal Leaders' Forum 11

9 May 2019, 8:45am–12:30pm

Tauondi College, Lipson Street, Port Adelaide

OUTPUT REPORT



Health Performance Council



Government of South Australia
Health Performance Council

Output report prepared by the Health Performance Council Secretariat

PO Box 3246 Rundle Mall ADELAIDE 5000

Telephone: 08 8226 3188

Email: HealthHealthPerformanceCouncil@sa.gov.au

Website: hpcsa.com.au

Artwork meaning: The Health Performance Council (shown as the largest main meeting place) watches over the health and care journey of people to make sure that they are getting the proper care in every way. The journey paths emanating to and from the meeting place indicate the distance, while the blue colour variations show the landscape types. Around the central meeting place are many communities. Yellow dots around these places keep the people safe through their journeys, ensuring proper care is achieved for everybody and that their needs are properly met.

Artist: Jordan Lovegrove, Ngarrindjeri, Dreamtime Public Relations, www.dreamtimepr.com.

Acknowledgement

The Health Performance Council acknowledges the Aboriginal peoples of South Australia—who in their diversity demonstrate resilience and continue to make significant contributions to South Australia, despite the ongoing effects of colonisation and dispossession.

The Council acknowledges the spiritual relationship Aboriginal peoples of South Australia have with their respective countries, and respects their cultural and heritage beliefs which are still important to them today.

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Agenda

1. Welcome to Country
2. Aboriginal Affairs Action Plan 2019–2020 — Nerida Saunders with the latest news
3. A new governance landscape for health — Discussion about arrangements that come into effect on 1 July 2019, including the new governing boards for local health networks
4. Commissioner for Aboriginal Engagement — An update from Dr Roger Thomas
5. Measuring institutional racism — Dr Chris Bourke and Assoc Prof Adrian Marrie talk about what they achieved in Queensland and the possibility of bringing their work to South Australia
6. Social determinants of health — Introduced by Dr Odette Pearson
7. News and updates — The latest from the Forum co-hosts plus a chance for everyone to share information on their projects, activities and other news
8. Meet and greet with the Minister for Health and Wellbeing — Hon Stephen Wade MLC joins the Forum for informal conversations over lunch

Participants

The forum was facilitated by Steve Tully (Chair, Health Performance Council)

Adrian Marrie

Alex Stengle (Tauondi College)

Cathy Leane (Women's and Children's Health Network)

Cheryl Cairns (Tauondi College)

Chris Bourke

Cindy D'Angelo (Women's and Children's Health Network)

Coral Wilson (Tauondi College)

Doug Turner

Eileen Van Iersel (Aboriginal Health Strategy)

Gloria Fernandes (Northern Adelaide Local Health Network)

Gloria Sumner (Tauondi College)

Jane Robinson

Jennene Greenhill[♦] (Health Performance Council)

Kerri Reilly (Aboriginal Health Unit – Royal Adelaide Hospital)

Klynton Wanganeen

Kurt Towers

Lewis O'Brien

Lisa Jackson Pulver[♦] (Health Performance Council)

Louise Saint (Tauondi College)

Margaret McCallum

Mark Waters (Watermarks)

Mary Patetsos[♦] (Deputy Chair, Health Performance Council)

Michele Robinson (Adelaide Primary Health Network)

Nerida Saunders (Aboriginal Affairs and Reconciliation)

Odette Pearson (Wardliparingga Aboriginal Research Unit – SAHMRI)

Rita Hirschhausen (Central Adelaide Local Health Network)

Robin Davey (Metro Youth Health, YSWD, WCHN)

Roger Thomas (Commissioner for Aboriginal Engagement)

Sharon Clarke (Aboriginal Well Women's Screening Program)

Sharron Williams (Aboriginal Family Support Services)

Stephanie Gollan (Tauondi College)

Hon Stephen Wade MLC (Minister for Health and Wellbeing)

Tanya McGregor (SA Health)

Tricia Cash (Central Adelaide Local Health Network)

Val Pollard (Tauondi College)

Velma Pollard

Vicki Jacobs

Wade Allen

Health Performance Council Secretariat

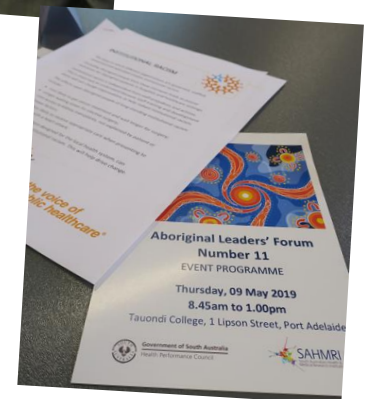
Jane Austin (Director), Andrew Wineberg, Nicholas Cugley, Trudi Duffield

[♦] Health Performance Council member

Photos from the forum



Photos were taken with participants' knowledge and consent. People were welcome to opt out if they chose.



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1. Welcome

Uncle Lewis O'Brien formally welcomed forum participants to Country.

Facilitator Steve Tully opened the forum with an Acknowledgement of Country and thanked all who attended—including leaders who travelled long distances to be here today.

We acknowledge the land that the forum meets on is the traditional lands for Kurna people and we respect their spiritual relationship with their country.

We also acknowledge the Kurna people as the custodians of the Adelaide region and that their cultural and heritage beliefs are still as important to the living Kurna people today.

We pay respects to the cultural authority of Aboriginal people attending from other areas.

Apologies

Steve Tully noted the apology from the forum's regular facilitator, Klynton Wanganeen. Klynton was in attendance as a guest but could not facilitate on this occasion due to ill health. Steve, on behalf of the forum, wished Klynton a full and rapid recovery and acknowledged his help in preparing for this forum along with his ongoing assistance, and noted that Klynton and the forum planning group had endorsed Steve as facilitator for this session.

Aboriginal leaders look forward to Klynton returning to his role as facilitator at future forums.

Steve also noted apologies from invited participants unable to attend:

- Hon Steven Marshall MP—Premier of South Australia
- Alex Brown—Wardliparingga Aboriginal Research Unit
- Elle Fraser-Barbour—Health Performance Council
- Teresa Branson—Aboriginal Health Watto Purrinna
- Tracy Rigney—Department for Child Protection

Updates since the last forum

The output report from the previous Aboriginal Leaders' Forum (no. 10) held on 26 October 2018 is available for download from the Health Performance Council website at hpcsa.com.au/get_involved.

A brief summary of key topics covered in previous Forums is listed in Appendix B of this output report.

2. Aboriginal Affairs Action Plan 2019–2020

Nerida Saunders—Executive Director, Aboriginal Affairs and Reconciliation—updated the Forum with the latest news on the Aboriginal Affairs Actions Plan 2019–2020.

Key points:

- The Premier wanted to provide an Action Plan with outcomes that will make a difference to Aboriginal people in South Australia. He sought commitment from Ministers and Departments to provide activities that each would commit to delivery on in a two year plan. The Plan was launched in December 2018 and is due for its first six-month progress update report in June. The progress update report should show, at the very least, a commencement of activities listed under the Plan.
- No barriers or issues have been identified by the lead agencies in being able to meet their commitments under the Plan.
- The 6-monthly progress update report is due in June 2019. It is anticipated that this review will be provided to Cabinet and the South Australian Aboriginal Advisory Council (SAAAC) to inform them on progress.

Nerida's update was followed by a Q&A session:

Q: Action Plan is a good strategy. Is it what the Aboriginal community wants to see?

A: The next iteration of the Plan will see more community engagement in the development of the proposed actions. Over the next 6–12 months Aboriginal Affairs and Reconciliation will be planning the process to undertake the development of the next Aboriginal Action Plan.

Q: What progress has been made around access to interpreter services for Aboriginal people, especially in relation to informed consent.

A: Aboriginal Affairs and Reconciliation has responsibility for developing interpreter services within South Australia. There are currently three main providers including interpreter services that are provided out of the Northern Territory. Currently evaluating what the supply and demand is in this state. Want to match skills to services required. South Australia needs its own services but issues to consider include: how to coordinate services; accreditation; training; pay rates; employment security and job satisfaction. By the end of the year will have a better idea what a South Australian interpreter service will need to look like.

Q: Any updates on Aboriginal remains repatriation?

A: The Commonwealth Government is responsible for the negotiations for return of overseas remains and collections. Aboriginal Affairs and Reconciliation is in discussions with the Commonwealth Government and SA Museum on getting remains from overseas collections and those held here in the state back to Country. The Australian Government supports the repatriation of ancestral remains and secret sacred objects to their communities of origin to help promote healing and reconciliation. Need to coordinate repatriation to reduce emotional impacts for community groups and also the logistics of planning locations to respect community needs.

Q: Action Plan has quantifiable deliverables, but how do you measure impact?

A: Action Plan will demonstrate impact in areas like employment, heritage, and opportunities for Aboriginal communities. Plan is not just about ticking a box. Cabinet is committed to making a real difference with this Plan. Recognises that many issues identified in the Plan are complex and have been known for a long time with little progress to date.

Nerida also updated the Forum on the Aboriginal Voice into the Closing the Gap process.

- In December 2018, the Council of Australian Governments (COAG) committed to forming a genuine formal partnership with Aboriginal and Torres Strait Islander Australians to finalise the Closing the Gap Refresh and provide a forum for ongoing engagement throughout implementation of the new agenda.
- A formal Partnership Agreement between COAG and Aboriginal and Torres Strait Islander Peak Organisations (Coalition of Peaks) came into effect in March 2019.
- A key commitment of the Partnership is the creation of a new Joint Council on Closing the Gap, comprising Commonwealth, state and territory Ministers, representatives of the Coalition of Peaks, and the President of the Local Government Association.
- The Joint Council met for the first time on 27 March 2019.
- To date the Aboriginal Legal Rights Movement (ALRM) has provided this Voice for South Australia. We are working with ALRM to design a South Australian Aboriginal Peak Body to specifically deal with delivering on the Closing the Gap agenda. This group could include community controlled organisations such as the Aboriginal community controlled health sector, family support services, domestic violence, drug and alcohol services etc.

3. A new governance landscape for health

Jane Robinson—Manager, Country Governance Reform Team—updated the Forum on the new governance landscape for country health.

Key points:

- Six regional local health networks (LHNs) replace the Country Health SA LHN, effective from 1 July 2019 under the *Health Care (Governance) Amendment Act 2018*.
- LHNs led by skills-based governing boards, with members appointed on merit.
- Establishment of governing boards is a government election commitment with the aim of putting responsibility and accountability at the local level.
- Governing boards are responsible and accountable for managing and providing health services within their area of responsibility (including control of the health budget).
- Expected benefits include: improved value (in terms of quality and safety of services, costs and service accessibility); increased clinician and community engagement in service delivery; greater service responsiveness and innovation in the way services are provided; and increased community confidence in the state's public health system.
- Chairs, chief executives and governing board members have been appointed. Governing boards have started to meet in transition roles. Preparation underway to transition staff and functions to new arrangements

- Governing boards will negotiate an annual service agreement with the Department for Health and Wellbeing and monitor and report on progress against key performance targets.
- Boards will be required to develop and publish a clinician engagement strategy to promote consultation with health professionals working in the LHN and a consumer and community engagement strategy.
- A Rural Support Service (RSS) will provide clinical and corporate advice and expertise for the six country LHNs and be hosted by one of the country LHNs. Budgets will go from Department directly to LHNs, not through RSS which is not centralised but rather there to support boards.
- Under the Act, at least one governing board member must have “expertise, knowledge or experience in Aboriginal health” (although not necessarily be an Aboriginal person themselves).
- Six new positions of Director of Aboriginal Health proposed—one for each LHN.
- Under proposal, the Director of Aboriginal Health:
 - reports directly to the governing board’s chief executive and sits on the executive leadership team
 - is responsible for Aboriginal health services including projects, collaboration and partnerships, strategy, monitoring and standards, and lead regionally-based teams
 - aims to build capacity and capability in the regions.
- Detailed design of the new LHNs and RSS will be finalised shortly.
- Opportunities to engage with these new organisations from the start.

Jane’s update was followed by a Q&A session:

Q: What will happen to the Aboriginal Engagement Strategy?

A: Has been embedded into new consumer and engagement strategy.

Q: What will happen to the Aboriginal employment strategy?

A: Up to boards to deliver on the Aboriginal employment strategy. Director of Aboriginal Health will be responsible for implementing strategy

A copy of Jane’s presentation is available for download from the Health Performance Council website at: hpcsa.com.au/get_involved

4. Commissioner for Aboriginal Engagement

Roger Thomas—Commissioner for Aboriginal Engagement—updated the Forum on the future of the South Australian Aboriginal Advisory Council (SAAAC).

Key points:

- Discussions under way to reform SAAAC over next 6–12 months. Not a criticism of SAAAC but rather recognition that it needs to reform.
- Under consideration is what new characteristics a reformed SAAAC would need to provide a stronger Aboriginal voice to South Australian Parliament.

- Looking for a new way forward that positions South Australia as a leader in a First Nations Voice to Parliament called for under the Uluru Statement from the Heart.
- Looking at pros and cons of various models, in consultation with key stakeholders. Key elements include:
 - Membership to be 50% elected, 50% nominated
 - Equal number of men and women
 - Elders will have lead role
 - Youth will also have a voice
- Next steps: Proposal for a new model will be taken to the Premier and Cabinet and then commence a lengthy, state-wide consultation process with Aboriginal communities.

Roger's update was followed by a Q&A session:

Q: Will this new body mean a shift from advisory to monitoring and evaluating?

A: Yes, this is about holding people accountable. Not tokenistic.

Q: How will vulnerable Aboriginal people in particular be represented?

A: That's where democratic aspect comes in. New body will be representative and accountable to the people. Want membership to come from the local community up.

- Roger also updated the Forum on progress in Aboriginal community health and wellbeing. Roger working with Chief Psychiatrist Dr John Brayley on next budget round. In particular looking at extra funding for programs to target methamphetamine (ice) use and suicide in Aboriginal communities. Wants to understand why young Aboriginal people in particular aren't accessing services.

5. Measuring institutional racism

Chris Bourke—Strategic Programs Director, Australian Healthcare and Hospitals Association—and Adrian Marrie—Director, Bukal Consultancy Services—on what they achieved with their work on institutional racism in Queensland and the possibility of bringing their work to South Australia. Key points:

- AIHW *Closing the Gap* report 2018—53% of the gap in health outcomes attributable to social determinants of health and risk factors. Remaining 47% due interpersonal racism, institutional racism, intergenerational trauma, lack of cultural safety.
- Racism is the expression of a person's belief in their racial superiority and their compulsion to maintain the power of their racial group over others.
- Racial prejudice is the unthinking negative beliefs about people from other racial groups.
- White privilege is the other side of discrimination—The benefits given to those who resemble the people who dominate the powerful positions in our society. Hard to see for those who were born with access.
- Unconscious bias—An unthinking bias against people of a race, culture or ethnicity different to your own. Synonym for racial prejudice
- Cultural safety—How care is provided rather than what care is provided; recognition of power inequity between practitioner and patient; and decolonising model of practice.
- Institutional racism—covert racism that enables organisations to deliver disparities in outcomes for some groups in society.

- Institutional racism leads to disparities in likelihood of accessing/receiving treatment, wait times for treatment and level of appropriate care received.
- Measuring institutional racism—the Matrix for Identifying, Measuring and Monitoring Institutional Racism within Public Hospitals and Health Services. An external assessment tool using only public information for transparency and verification.
- Matrix has five key domains: (1) Inclusion in governance; (2) Policy implementation; (3) Service delivery; (4) Employment; (5) Financial accountability.
- Matrix basics:
 - Premise: What can be measured can be managed
 - Purpose: To encourage transparency and accountability in the implementation of public health policies intended to close the gap in Indigenous health disparities
 - Methodology: Based on a simple measuring system; criteria selected for measurement drawn from public closing the gap health policies; only publicly available information is used; it is a desk-top exercise.
 - Application: As a measuring tool it can be used both externally and internally
 - What it does not measure: Incidence of individual racist behaviour, casual racism; clinical performance
 - It is adaptable: Can be used in other domains where institutional racism is experienced by the Indigenous community.

The presentation was followed by a Q&A session:

Q: If you audit papers how do you measure impact/difference?

A: Accountability is about power. The paper trail is the tools that the powerful use.

Some accountability metrics aren't public. If you're not publishing metrics then you're not accountable. Under the Matrix, if the data isn't publicly available then the organisation gets marked down.

Q: Is this (the Matrix) all that's needed to prevent institutional racism? What's the link between the Matrix and outcomes?

A: No. This is just one tool. Matrix isn't a silver bullet but will make things better. If you have institutional racism this encourages inter-personal racism to flourish.

Q: What if politicians don't like to hear about it?

A: Australians don't like the 'r-word'. Matrix works by holding power structures accountable for outcomes. The Matrix is a measuring/evaluation tool that is repeatable and can be monitored over time. Expect to see improvement.

Closing comments from the Forum to the presenters:

- The important thing is the money trail. Need to hold organisations accountable for Aboriginal funding being spent where it's supposed to be.
- When it comes to breaking down racism it usually takes one trailblazer who is usually victimised. Need to empower individuals.

Copies of Chris and Adrian's presentations are available for download from the Health Performance Council website at: hpcsa.com.au/get_involved

6. Social determinants of health

Odette Pearson—Senior Research Fellow, Wardliparingga Aboriginal Research Unit, SAHRMI—updated the Forum on activities of her team’s research program on social determinants of health. Key points:

- Significant numbers of research participants and research advisory group members raise the need to improve social determinants of Aboriginal health as imperative to improving health outcomes.
- In response to this, Wardliparingga is currently running a pilot program (Social and Cultural Pathways Program) that aims to link individuals and/or families with broader social services beyond the health system. This program is offered to participants of the Aboriginal Diabetes Study currently and is funded by a philanthropic group. An Aboriginal student will evaluate the program as part of her PhD.
- In the future, Wardliparingga plan to provide a Social Determinants of Health Project in collaboration with health services.
- In the Centre for Research Excellent in Aboriginal Chronic Disease Translation and Exchange (CREATE), Wardliparingga has completed a case study with an Aboriginal Community Controlled Health Organisation (ACCHO) in South Australia, to showcase an example of an ACCHO that addresses the social determinants of health. Within CREATE, Wardliparingga has also completed a review of 70 ACCHO annual reports that provides further insight on the work of ACCHO's in this space from a national perspective. These pieces of work will inform a guide for the ACCHO sector.

7. News and updates

Community workshop for Aboriginal and Torres Strait Islander Peoples

- Kerri Reilly invited Forum participant to a workshop on cultural design principles for the Queen Elizabeth Hospital (TQEH) Stage 3 redevelopment, a free event to take place on 15 May 2019 and welcoming consumers and members of the community.
- The Health Performance Council emailed a copy of the workshop flyer to the Aboriginal Leaders Forum mailing list on 10 May 2019.

8. Meet and greet with the Minister for Health and Wellbeing

- The Hon Stephen Wade MLC joined the Forum for informal conversations over lunch.

FORUM CLOSED AT 12:30pm

Thank you to all participants for your valuable contributions

Summary of review card feedback from the forum

Review cards were distributed to seek feedback from attendees on the value of the forum and how the HPC Secretariat might improve forums in the future. Review card feedback is considered by the planning group.

Method

Review cards were distributed on the attendees' seats before lunch. The facilitator reminded people to fill the cards in and leave them with HPC secretariat staff.

Response rate

A total of 42 participants attended the Forum including facilitator, speakers, delegates and other guests, Health Performance Council members and secretariat staff.

A total of 12 completed review cards were collected. If we exclude secretariat staff (4) and the facilitator from the denominator (as they were directly involved in organising the forum) the response rate is 12/37 or 32%.

Q1. How do you rate the event in terms of its outcomes and outputs?

The average score was 8.5 out of 10, with a range of 7–10.

Q2. How do you rate the event in terms of its design and running?

The average score was 8.3 out of 10, with a range of 6–10.

Q3. What was best about the event?

There was positive feedback from attendees about the quality of the presentations and information provided and having the Minister attend.

Q4. What would you like to have been different?

Some respondents feel these forums need to go for longer with more time needed for discussion and audience participation. Other feedback worth noting was a request for a more structured agenda.

Q5. What will you tell others?

Respondents said they encourage others to attend as the forums are informative with opportunities to engage with key people.

Q6. What should happen next?

Feedback to this question can be generalised as respondents keen to follow up and collaborate on projects outlined by the presenters.

Q7. One word summarises how you feel now?

Waiting / Positive / Frustrated / Informed / Interested / Challenged / Great / Hopeful / Optimistic / Inspired / Re-energised / Connected

About the forums

A. Purpose of the Aboriginal Leaders' Forums

The purpose of the Aboriginal Leaders' Forums is to engage with leaders in the Aboriginal community and Aboriginal people who are leaders in the health system to:

- establish the health priorities of Aboriginal communities in South Australia
- guide the Health Performance Council in its monitoring and review of Aboriginal health status and performance measures in areas where the health system provides a response to Aboriginal people's health needs.

The Health Performance Council regularly co-hosts these forums in co-operation with the South Australian Health and Medical Institute's (SAHMRI) Wardliparingga Aboriginal Research Unit. The sessions are facilitated by Klynton Wanganeen and feature presentations by guest speakers, updates on progress of issues that impact on the health of Aboriginal people in South Australia, and resolution of future directions on Aboriginal health research topics.

B. Previous Aboriginal Leaders' Forums

The inaugural Aboriginal Leaders' Forum took place at Tauondi College on 25 October 2013. A condensed summary of topics covered at previous forums is tabled below:

Forum	Date	Key topics
1	25 Oct 2013	<ul style="list-style-type: none">▪ Aboriginal health and Aboriginal leadership▪ The Health Performance Council's role and the purpose of these forums▪ Governance, leadership and Indigenous rights▪ The role of the Aboriginal community-controlled sector in Aboriginal health leadership▪ How Aboriginal Leaders Forums should work in the future▪ Overcoming cardiovascular disease in Aboriginal people
2	29 May 2014	<ul style="list-style-type: none">▪ Aboriginal health data stories – Spotlighting the health system's performance▪ What it means to be an Aboriginal leader
3	5 Nov 2014	<ul style="list-style-type: none">▪ How the health system can be held accountable for its Aboriginal health care outcomes using internal and external means▪ How will we hold the health system to account for getting better Aboriginal health outcomes?▪ What specific actions for improving health system accountability for Aboriginal health outcomes will we recommend to the Minister for Health and the Premier?▪ What specific action can we take to continue the momentum of the Aboriginal Leaders' Forums?
4	27 Nov 2015	<ul style="list-style-type: none">▪ Keynote speaker: Ngiare Brown on Aboriginal leadership▪ Panel discussions with guest speaker Dorothy Keefe, SA Health's Clinical Ambassador for Transforming Health on:<ul style="list-style-type: none">– understanding Transforming Health and the directions the government is taking– how Transforming Health can improve the health outcomes for Aboriginal people– how Aboriginal people generally can be made aware of the reforms and be included in consultations and decision-making that affects them
5	18 May 2016	<ul style="list-style-type: none">▪ Keynote speaker: Daryle Rigney, Dean, Office of Indigenous Strategy & Engagement, Flinders University, on Indigenous governance and nation building▪ Update on progress of Transforming Health, including formation of an Aboriginal Advisory Group▪ Guest speaker: Michael Cousins, Chief Executive, Health Consumers Alliance of SA, on engaging Indigenous consumers▪ Presentation of preliminary results from research topic analysis by the Health Performance Council and Wardliparingga Aboriginal Research Unit

6	24 Nov 2016	<ul style="list-style-type: none"> ▪ Transforming Health: A conversation with Dorothy Keefe, SA Health's Clinical Ambassador for Transforming Health and Jackie Ah Kit, Chair, Transforming Health Aboriginal Expert Advisory Group on: <ul style="list-style-type: none"> – How Transforming Health is improving health outcomes for Aboriginal people – How Aboriginal people are being made aware of the reforms and included in consultations and decision making that affects them. ▪ Impact of drugs, alcohol and addiction on Aboriginal communities – Presentations and panel discussion with James Ward (Head Infectious Diseases Research Aboriginal Health, SAHMRI), Chris Holmwood (Addiction Medicine Specialist, DASSA), and Mark Thompson (Coordinator Aboriginal Clinical Services, DASSA) on: <ul style="list-style-type: none"> – Epidemiology of drug and alcohol use in Aboriginal rural and remote communities – Patient pathways for people presenting to hospital for acute drug abuse – Drug and alcohol services program delivery.
7	31 May 2017	<ul style="list-style-type: none"> ▪ Keynote speaker: Lisa Jackson Pulver, HPC member, on findings emerging from the latest Aboriginal and Torres Strait Islander population data released by the Australian Bureau of Statistics following the 2016 Census. ▪ Launch of the consultation draft of the HPC's Aboriginal health case study ▪ SAHMRI's Wardliparingga Aboriginal Research Unit on the implementation of the Aboriginal heart and stroke, diabetes, and cancer plans
8	15 Nov 2017	<ul style="list-style-type: none"> ▪ Keynote speaker: Treaty Commissioner for South Australia, Dr Roger Thomas on progress of Treaty negotiations between the South Australian government and South Australian Aboriginal nations. ▪ Update from the Health Performance Council on progress and achievements to date in its 2015–2018 review program.
9	22 May 2018	<ul style="list-style-type: none"> ▪ Keynote speaker: The Hon Steven Marshall MP, Premier of South Australia, outlined his government's policy approach to Aboriginal Affairs and Reconciliation and its commitment to working across disciplines and across government portfolios to achieve better outcomes. Followed by a Q&A session. ▪ Health Performance Council member Rick Callaghan presented on his business, career and personal experiences. ▪ Introductions by Chris Burns, South Australian Mental Health Commissioner and Grant Davies, Health and Community Services Complaints Commissioner. ▪ Updates from Odette Pearson and Kim Morey on current research by the Wardliparingga Aboriginal Research Unit and implementation of the South Australian Aboriginal Chronic Disease Consortium's plans.
10	26 Oct 2018	<ul style="list-style-type: none"> ▪ Priority areas in Aboriginal health identified with the Premier at the ninth forum—Update and discussion on progress. ▪ Devolved health services in Country SA from July 2019—Discussion of new arrangements. ▪ Progress in Aboriginal Affairs and Reconciliation.

C. Health Performance Council

The Health Performance Council (HPC) is the South Australian Government's statutory Ministerial advisory body established under the *Health Care Act 2008* to provide advice to the Minister for Health and Wellbeing on the performance of the health system, health outcomes for South Australians and specific population groups and the effectiveness of community & individual engagement.

We publish reviews of South Australian health system performance on our website: hpcsa.com.au.

D. Wardliparingga Aboriginal Research Unit

The [Wardliparingga Aboriginal Research Unit](#) within the South Australian Health and Medical Institute (SAHMRI) conducts research that is of direct relevance to Aboriginal people in South Australia. Research is focused on the significant gap between the health status and life opportunities available to Aboriginal people when compared to other Australians. Wardliparingga's goal is to generate positive, long-term change for Aboriginal families and communities in South Australia.

