

Talk-About

The official newsletter for the Aboriginal and Torres Strait Islander Health Unit

July/August 2017

Metro North Hospital and Health Service *Putting people first*

Caboolture NAIDOC celebration showcases culture and language

Around 1000 community members attended an inaugural Caboolture NAIDOC Family Fun Day held on Tuesday 4 July at St Columban's College in celebration of NAIDOC Week.

The 2017 theme for NAIDOC - Our Languages Matter - was celebrated through traditional dance and storytelling from the Gubbi Gubbi dance troupe and Keriba Mabaigal Torres Strait Islander Women's Dance Group.

Over 40 stallholders took part in the celebration, providing health advice, resources and cultural support to participating local families.

Metro North Hospital and Health Service (MNHHS) Aboriginal and Torres Strait Islander Health Unit Director Paul Drahm said he was thrilled with the level of local community support.

"It was great to see so many from our Aboriginal and Torres Strait Islander community attend the celebration, including guests from Caboolture and the Sunshine Coast, to as far as Sydney and Western Australia," Mr Drahm said.

"We look forward to hosting an even bigger event next year."



L-R: Thomas, Jakaiden, Danika, David, Sarah and Shonique enjoyed some traditional painting.

He told the audience by 2031, the Indigenous population in Brisbane is projected to be 133,189 people, almost double that of all other states in Australia.

"We are seeing significant growth in our Indigenous Hospital Services at Caboolture Hospital. In the past month, our Indigenous Hospital Liaison Officer Stella Laidlaw has seen 236 patients and provided 370 occasions of service," he said.

"Caboolture patients by location make up two of the top five occasions of service for the whole MNHHS Aboriginal and Torres Strait Islander Health Unit.

"That is why we have employed an additional Indigenous Hospital Liaison Officer to be located within Caboolture Hospital to help cater to this growth."



Emma Dunleavy with her son Cowen and niece Lexi from Morayfield.



Jade Batalibasi from Caboolture with her three week old baby Amber.

Families at the event were also filmed as part the MNHHS Accurate Indigenous Identification campaign, encouraging Aboriginal and/or Torres Strait Islander consumers to identify their heritage when accessing Caboolture Hospital.

Brenda Fisher from Burpengary said she was proud to identify as a strong Aboriginal woman.

"It's important for our people to identify to access culturally appropriate medical facilities locally and to ensure they receive the right support," she said.



Give us feedback

Talk-About

We welcome your feedback, contributions, story ideas and details on any upcoming events. Please contact Aboriginal and Torres Strait Islander Health Unit Communications Manager Renee Simon at Renee.Simon@health.qld.gov.au or phone (07) 3139 3231.

Aboriginal and Torres Strait Islander Health Unit

If you have any feedback regarding the Aboriginal and Torres Strait Islander Health Unit services, programs and initiatives, you can contact the following:

Mail to:

Aboriginal and Torres Strait Islander Health Unit, Building 26, Chermide Community Health Centre, 490 Hamilton Road, Chermide QLD 4032.

Email to:

A_TSIHU_MNHHS@health.qld.gov.au

Alternatively, call and ask for our Safety and Quality Officer on 3647 9531.

Contact information

Royal Brisbane and Women's Hospital

Indigenous Hospital Liaison Officer	Ph: 3646 748 or 3646 1696
Indigenous Patient Journey Officer	Ph: 3646 5612 or 0428 861 888
Team Leader	Ph: 3647 4183 or 0408 472 385

The Prince Charles Hospital

Indigenous Hospital Liaison Officer	Ph: 3139 5165 or 3139 5062
Indigenous Patient Journey Officer	Ph: 3139 6622 or 0409 583 967
Team Leader	Ph: 3139 6300 or 0439 082 908

Redcliffe Hospital

Indigenous Hospital Liaison Officer	Ph: 3049 6791
Team Leader	Ph: 3139 6300 or 0439 082 908

Caboolture Hospital

Indigenous Hospital Liaison Officer	Ph: 5433 8249 or 5433 8708
Team Leader	Ph: 3139 6300 or 0439 082 908

After Hours Team

Saturday and Sunday 10am to 6:30pm	Ph: 5433 8249
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Indigenous Hospital Liaison Officer	Ph: 3647 4183
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Indigenous Patient Journey Officer	Ph: 0409 583 967
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Indigenous Acute and Primary Care / Sexual Health Team

Manager: Robyn Chilcott	Ph: 3492 1823
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Cultural Capability / Indigenous Strategic Development

Manager: Isaac Simon	Ph: (07) 3139 4912
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A&TSIHU Safety & Quality – Pine Rivers CHC

Tracy Grant – Indigenous Safety & Quality Coordinator	Ph: 3492 1818 or Mob: 0417 027 642
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Caley Malezer – Project Officer Safety & Quality	Ph: 3492 1820 or Mob: 0417 270 854
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Paul Drahm

Acting Director, Aboriginal and Torres Strait Islander Health Unit

I was thrilled to see the community support at our inaugural Caboolture NAIDOC Week Family Fun Day held on Tuesday 4 July at St Columban's College. It was great to see so many Aboriginal and Torres Strait Islander families attend and celebrate the 2017 NAIDOC theme – *Our Language Matters*.

A word from the Acting Director

We had close to a thousand people attend the event during the four hours and over 40 stallholders from various community organisations take part and we also captured over 60 videos from consumers as part of our Accurate Indigenous Identification Campaign.

It was encouraging to see our Metro North Hospital and Health Service Executive attend the event, including Acting Chief Executive Shaun Drummond, The Royal Brisbane and Women's Hospital Executive Director Amanda Dines, Caboolture Hospital Executive Director Lance Del Ray, Redcliffe Hospital Director Louise Oriti and MNHHS Board Member Associate Professor Cliff Pollard AM.

Importantly, I'd like to acknowledge our A&TSIHU event committee, who have spent the past six months coordinating the event and all of our staff who were able to assist on the day, whether it was helping with stallholders or cooking sausages on the BBQ. A special thank you also to St Columban's College in Caboolture for

allowing us to hold the event within their auditorium and school grounds.

During NAIDOC Week, I was also able to attend community led celebrations - the annual Koobara Northside NAIDOC Week Family Fun Day and the Musgrave Park celebration on the Friday. Both events were well attended and gave myself and our staff the opportunity to engage with our local Aboriginal and Torres Strait Islander communities.

Across MNHHS, I was humbled to see each of our facilities initiate their own NAIDOC Week acknowledgments. Redcliffe Hospital held their own breakfast BBQ event for staff, patients and the community, while Chermide Community Health Centre Administrative Officer Angela James and Anita Gorissen from The Prince Charles Hospital thoracic ward organised a display for patients to enjoy. This shows a real commitment to acknowledging the significance of NAIDOC week from our non-Indigenous colleagues and a further commitment to Reconciliation.

Executive Director's message Community, Indigenous and Subacute Services



Chris Seiboth
Executive Director, Community,
Indigenous and Subacute Services
Metro North Hospital and Health Service

During National Reconciliation Week (27 May – 3 June), CISS officially launched our Statement of Commitment to Reconciliation. The launch saw CISS Executive and staff reflect on why personal and collective Reconciliation with our Aboriginal and Torres Strait Islander communities is critical for all Australians to commit to. By undertaking this reflection and action we can take the next steps to build a stronger and more harmonious community for all.

For me it was a deeply moving time to hear the stories of Uncle Marshall and Uncle David on the injustice and inhumane treatment to them and others, sadly part of our recent history. Past policies and practices created and continue to leave deep and tragic scars through precious parts of our community. The chilling and disturbing treatment of the young boys and girls in the dormitories of Cherbourg made me and many others in the Brighton auditorium openly weep.

Through my sadness and compassion for the two generous Uncles present and for the many who experienced similar treatment across the country I was moved to action. This action will be both personal and on behalf of the CISS Directorate. I have made personal commitments to honour Uncle Marshall and Uncle David that I will disclose when I have acted on them.

The collective CISS commitment is that we will create a heartfelt Reconciliation Action Plan that delivers on real actions that advance the health and wellbeing of current and future generations of Indigenous Australians. The specific details will be shaped over the coming months by bringing together our Aboriginal and Torres Strait Islander staff with non-Indigenous staff and community members.

As well as the deeply moving time of the day, we also had the wonderful opportunity to celebrate the week by participating in a range of traditional Indigenous games, table tennis and some very serious football (soccer) shenanigans. Congratulations to the Brighton rehabilitation team who were undefeated in the football rounds and will be the holders of the CISS Reconciliation Shield for 2017.

A big thank you to those who made the day a wonderful success, the organising committee, all the participants and spectators as well as a special mention to the wonderful members of the food services staff who donned their skirts and waved their pom poms with great enthusiasm to cheer the teams on. I sincerely thank you all.



We are now calling for Expression of Interest to our staff to be part of the Reconciliation Action Plan Working Group.

If you have any questions about the RAP, please contact Phil Ahmat at Phillip. Ahmat@health.qld.gov.au

Chris Seiboth
Executive Director,
Community, Indigenous and
Subacute Services



L-R: A&TSIHU Director Paul Drahm, CISS Executive Director Chris Seiboth with Uncle David Wragge and Uncle Marshall Saunders.



Members of the CISS Executive and A&TSIHU Management team officially launch the Statement of Commitment to Reconciliation.

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Safety and Quality

with Tracy Grant

The Aboriginal and Torres Strait Islander Health Unit have had some big achievements over the past 18 months. We as the Aboriginal and Torres Strait Islander Health Unit will strive to continue playing an active role to ensure continuous improvement for the quality and safety of health care as per The Australian Council on Healthcare mission.

Standard 11 – Service Delivery

Under Standard 11.5 “Diverse needs and diverse backgrounds” in the Organisation Wide Survey there is mention of the Mandatory Training for new staff that is provided by the Aboriginal and Torres Strait Islander Cultural Practice Program and the attendance demonstrates excellence. This Standard was “Satisfactorily Met” overall by CISS.

Standard 12 – Provision of Care

Under the (Standard 12.1) “Assessment and care planning” there is mention of Mandatory Training for staff to ensure specific needs of Aboriginal and Torres Strait Islander patients are met in a respectful manner. The Indigenous Identification Procedure is also mentioned as a standard practice for all staff to ask the question of whether the patient identifies as being “Aboriginal and/or Torres Strait Islander origin” which was also discussed with staff of the Aboriginal and Torres Strait Islander Health Unit when interviewed. Rating was SM – Satisfactorily Met

ORGANISATION WIDE SURVEY Report

This (right) is the Accreditation Certificate to certify that “The Australian Council on Healthcare Standards” has accredited Metro North Hospital and Health Service – Redcliffe, Caboolture and Kilcoy Hospitals and MNHHS Community, Indigenous and Subacute Services (CISS).



WHAT IS ACCREDITATION?

Accreditation is a formal process to assist in the delivery of safe, high quality health care based on standards and processes devised and developed by health care professionals for health care services. It is public recognition of achievement of accreditation standards by a health care organisation, demonstrated through an independent external peer assessment of that organisation’s level of performance in relation to the standards.

Under Standard 12.3 “Ongoing care and discharge/transfer”, there is mention of the surveyors having privilege of meeting with the A&TSI Health Unit and noted the services provided, such as Indigenous Hospital Liaison staff assisting with inpatients to discharge by providing a range of services and the Indigenous Adult Team providing care to patients with chronic illness and to the homeless. There was also recognition of services in the schools, child and family programs, including a review of Models of Care for appropriateness for Aboriginal and Torres Strait Islander families. The A&TSI Health Unit was also recognised for strong consumer engagement. Rating was SM – Satisfactorily Met.



Indigenous Acute and Primary Care Team

with Manager, Robyn Chilcott

Centacare Waminda Respite Centre provides services and care to individuals and elderly groups including Indigenous older people over the age of 50 years and their carers living in their home.

The aim of the aged care program is to promote care for older people to maintain quality of life and to live independently in their own home for as long as possible. Waminda provide a range of flexible services that maximise choice for the older person and their family.

Some of these services include domestic help, personal care, transport, respite care, social support and activities and health support.

The team were privileged to once again work with Waminda Respite Centre on the immunisation outreach program and this partnership created an opportunity for staff to touch base with community elders and staff to network and identify further programs that could be run in the future.

The Indigenous Acute & Primary Care Team have a primary goal of improving, maintaining and supporting clients in the community and post discharge from hospital services ensuring they can safely return home from hospital with services provided to support their health needs. The team follow up with regular home visits to support clients in the community and coordinate care required to avoid hospital readmission.

Annual vaccination is the best way of preventing the flu and any associated illness and reduces hospitalisations that occur from these illnesses. Flu shots should be given every year because the flu virus is constantly changing. Every year, the flu vaccine changes too, so it protects against the flu strains which are most likely to be around during that winter.

Every year, the flu vaccine changes too, so it protects against the flu strains which are most likely to be around during that winter.

Immunisation programs urge people to plan ahead and start booking their flu shot with their GP and help bring down flu rates across the country to protect themselves and those most at risk. The elderly are especially high-risk due to their age and the high prevalence of chronic medical conditions. The Indigenous Acute & Primary Care Team work with public health to provide outreach services to local organisations to enable influenza immunisation to at risk groups.

This year the team provided an immunisation outreach to the elderly Aboriginal and Torres Strait Islander community through Centacare Waminda Respite Centre at Ningi. This was well received by the clients, with 25 people immunised as part of the program.



Waminda Staff and Queensland Health Staff.



Waminda staff.



Members of the Acute and Primary Care team.

Indigenous Sexual Health Team

with Program Coordinator, Ronald Abala

Vision

To ensure that all Aboriginal and Torres Strait Islander people within the Metro North Hospital and Health Service catchment and beyond, have equitable access to health services that are culturally appropriate and culturally safe.

Mission

To increase health services for Aboriginal and Torres Strait Islander peoples within the MNHHS area and to urban, and rural and remote communities across Queensland in order to improve health outcomes and contribute to the Council of Australian Governments' (COAG) Close the Gap initiatives.

We will do so by delivering high quality and culturally safe holistic health care to our Aboriginal and Torres Strait Islander patients, families and their communities accessing our hospitals and facilities.

Core Values

- To be committed, honest and work together for our Aboriginal and Torres Strait Islander people
- To advocate for positive health outcomes
- To display respect and dignity to our patients and their communities
- To respect our patients cultural beliefs and understand their needs

Homeless Connect was initiated in Brisbane in November 2006. The success of the event is due to the contributions of service providers, volunteers and the community.

Homeless Connect is designed to give immediate access to a range of practical services in a client-focused environment for people experiencing or at risk of hardship or homelessness.

This is the nineteenth Homeless Connect event held by Brisbane City Council, with over 14,000 people assisted since 2006 to access new pathways out of homelessness. This year there were roughly 50 service providers, enabling guests to access services in the areas of accommodation, legal assistance, employment, youth, health/medical services and support.

Other services on the day included free food hampers, clothing, natural therapists, hairdressing, arts and crafts and other recreational activities.

The Indigenous Sexual Health Program contributed and provided an information stall with resources and give-aways. Attendees were asked to complete a short survey to obtain the resources.

During the day, the Sexual Health Service made contact with 66 females, 83 males and two family groups. Approximately 149 people accessed the Sexual Health service for information and resources and 80 people participated in and completed the survey.

The demographics/information collected over the past three years will be used to provide future clinical support and services to targeted groups in the Metro North catchment.

By attending this program we have found that it has broken down barriers and stigmas associated with sexual health related issues. We believe that it has strengthened our networking and partnerships and has given us the potential to be recognised as an essential service for this target population and service providers for referral purposes. It has also allowed members of the community to be more familiar and comfortable when accessing services and staff within Sexual Health Services. We have found that returning attendees will approach the team with issues and if not able to provide services on that day we can assist them with appropriate referrals.

AGE	ABORIGINAL	TSI	OTH-ER	LG-BTI	MALE	FEMALE	SEXUAL HEALTH TESTING	CLINICAL SETTING	OUTREACH SETTING
14-29	2 (ATSI) 1 (A&O) 1 (ATSI)		7		4	6	Yes - 7 No - 3	Yes - 10 No - 0	Yes - 9 No - 0 Incomplete - 1
30-39	5 1 (ATSI) 1 (A&O)	1	5		5	8	Yes - 7 No - 6	Yes - 11 No - 2	Yes - 9 No - 4
40-49	13 5 (A&O)		10	1	19	10	Yes - 9 No - 4	Yes - 23 No - 6	Yes - 19 No - 4 Empty - 6
50-59	5 2 (A&O)	1	7		7	8	Yes - 9 No - 6	Yes - 11 No - 4	Yes - 7 No - 5 Empty - 3
60-69	3 2 (A&O)		4		6	3	Yes - 5 No - 4	Yes - 6 No - 2 Empty - 1	Yes - 2 No - 1
70+			2		0	2	Yes - 1 No - 1	Yes - 1 No - 1	Yes - 1 No - 1



Clinical Nurse Consultant Dene Campbell and Indigenous Health Worker Kim Wedel.

The comments section of the survey this year reflects the need for "outreach services":

"Keep up deadly work in our community"

41 year old Indigenous female

"Outreach sexual health services seem like a great idea for the homeless population of Australia"

44 year old Non-Indigenous female

"Service could engage homeless in services. Create connection to people who don't get access due to situation/living trauma"

46 year old Indigenous male

Indigenous Strategic Development Team (ISD)

with Manager, Isaac Simon

Members of the Indigenous Strategic Development team had the opportunity to attend the annual Queensland Health eHealth Summit in May.

A highlight for me was listening to a patient experience from Pharmacist and Cystic Fibrosis (CF) patient Doug Porter. He shared his story as a consumer advocate for improving the care of those people who suffer chronic illness, including helping deliver single room accommodation for CF patients and use of WiFi.

“CF patients are young and need to be connected through apps and daily life. Life still goes on when you’re in hospital and one small expense can make a huge impact on the patients’ social and mental wellbeing,” Doug told the audience.

Consumer advocates play an integral role to ensure successful patient outcomes. For our Indigenous patients, our goal is to continually ensure they are accessing services that are culturally appropriate and culturally safe.



Mike Davis and Isaac Simon at the eHealth Summit.

Introducing innovations like WiFi access for patients can improve patient outcomes. For our Indigenous consumers, providing culturally appropriate materials, access to translation services or even something simple like seeing a non-Indigenous staff member wearing one of our Identification shirts all helps to improve the outcomes of our patients.

If you have any feedback on ways to further improve our services within MNHHS, I’d encourage you to contact one of our Patient Liaison or Consumer Liaison officers at:

Royal Brisbane and Women’s Hospital

Phone: (07) 3646 8216
Email: RBWH-PLS@health.qld.gov.au

The Prince Charles Hospital

Phone: (07) 3139 4000
Email: TPCH_CLO@health.qld.gov.au

Redcliffe Hospital

Phone: (07) 3882 7728
Email: RedH-Feedback@health.qld.gov.au

Caboolture and Kilcoy Hospital

Phone: (07) 5433 8199
Email: CabH-Feedback@health.qld.gov.au

Community, Indigenous and Subacute Services

Phone: (07) 3049 1469
Email: CISS-CLO@health.qld.gov.au

Aboriginal and Torres Strait Islander Health Unit

Phone: (07) 3139 3235
Email: A_TSIHU_MNHHS@health.qld.gov.au

INFOCUS

Holistic approach to palliative care for Indigenous patients

The Prince Charles Hospital Indigenous Hospital Liaison Officer, Michelle Pieper, recently took part in Program of Experience in the Palliative Approach (PEPA) placement at Ipswich Hospital Campus.

PEPA is a program established to provide health care workers with an opportunity to develop skills in the palliative approach. The program runs for between 2-5 days and involves placement within a hospital environment.

Since the program began in 2003, over 3,500 health professionals have undertaken a PEPA placement, helping to build the capability and capacity of the health workforce to provide quality palliative care to all Australians.

“Palliative care feels very much like a holistic approach to patients who are under the palliative care program, which

concentrate on admissions, outpatient appointments, home visiting and referral systems. A wraparound approach which felt warm and comfortable at a very seamless service,” Michelle said.

“I found the palliative care unit to be like an Indigenous community or hospital organisation which made me feel very comfortable and supported.”

Michelle said staff were culturally competent in all patient care and approaches with Indigenous and non-Indigenous patients and or clients and their families/carers.

“Cultural interpretation will differ from person to person for staff or patient cultural needs, but the care taken by the staff at Ipswich Hospital was the same as our staff in regards to Closing the Gap initiatives,” she said.



“The approach is very holistic as palliative care doesn’t always mean death and dying - it can be related to pain management and cultural needs.”

For further information regarding the program or to obtain details on how to apply for a placement, contact Aurora Hodges, PEPA Qld Manager on 07 3646 6216 or email pepaqld@health.qld.gov.au



Indigenous Hospital Services

with Natasha White,
Program Manager

The guide will help inform community, health services and PTSS of the different accommodation available around RBWH, TPCH, Indigenous specific accommodation, accommodation with eligibility requirements and if the accommodation is approved by the patient travel subsidy scheme (PTSS).

This resource will be available on our internet website in the near future at: <https://www.health.qld.gov.au/metronorth/atsi>

Why We Are Consulting

Your experience as a patient at the hospital is very important to us. We are committed to improving the care we provide. We want to deliver a better experience for all our patients.

To do this we need your help. We would like to hear what we do well and what we can improve on.

Inpatient Survey:

<https://metronorth.citizenspace.com/rbwh-1/rbwh-patient-experience-survey-inpatients/>



Indigenous Hospital Services
Accommodation Guide 2017

Supported by the IMHOIS Aboriginal and Torres Strait Islander Health Unit.



Outpatient Survey:

<https://metronorth.citizenspace.com/rbwh-1/rbwh-patient-experience-survey-outpatients/>

If you are accessing RBWH during this time you maybe approached by a staff member to take part in the survey.

New Staff

Over the past months we have welcomed new staff members to the team.

Caleb Meredith and Emma Galea to our team at RBWH, Jonathan Tapau and Karen McKellar to our After Hours team and Tyler Lea joined our team at Caboolture Hospital.

Service Improvement through Community Engagement

Through community engagement activities undertaken, we have been able to identify service improvement initiatives. One of these initiatives is the development of an accommodation guide.

Identification: It's your right to a healthier life

The Accurate Indigenous Identification campaign is designed to highlight the importance of Aboriginal and Torres Strait Islander patients to identify when accessing Metro North Hospital and Health Service hospitals and facilities. Consumers at the Caboolture NAIDOC Week Family Fun Day celebration were filmed as part of the campaign and asked why they are proud to identify and why others should identify on admission to hospital.



Patrick Williams

"There is a lot of good resources and services out there for our people. There is a lot within the northern region. It's important to get within a network to help us, help others."



Aunty Edna Billy

"My culture is very important and where I come from."



Normie Stevens

"I'm proud to be an Indigenous Australian. Everyone should identify when they go to the hospitals. Don't be afraid to identify because the support is there and don't be scared to come forward to the people at the hospital as they can only support you and that's our job to look after you."



Mick Douglas, Caboolture Police Liaison Officer

"We've lost a lot of our history and when we find it I think it's a proud thing for all of us, especially for the stolen children generation and we take hold of what is ours and what is our inheritance and we're proud to take that on so we can pass all that knowledge on to our children and educate them around cultural awareness and the country we come from."



Fiona Smallwood

"I'm proud to identify as Aboriginal, as we are part of the longest living culture in the world. I think Aboriginal and Torres Strait Islander people should access the programs at the hospital. As a mother, I've accessed the program from when my baby was conceived up until my baby was born. I received a lot of support as a first time mum and they were very good at helping me settle in to motherhood."

Ngarrama Family Community Service

In early June, we held an Elders Consultation at the Brighton Health Campus to present the proposed Ngarrama Family Model of Care. We invited Elders from across all the Metro North area. Attendance was high with over 16 Elders participating and several community organisations represented.

The Ngarrama Family team presented the model of care design and answered questions from the Elders on the service model.

The Elders then were tasked into small groups to share their thoughts and suggestions on ways to enhance the model of care.

The day was a great success and we thank the Elders of the Metro North area for taking the time to engage in consultation and look forward to the ongoing community engagement by the new Ngarrama Family model.

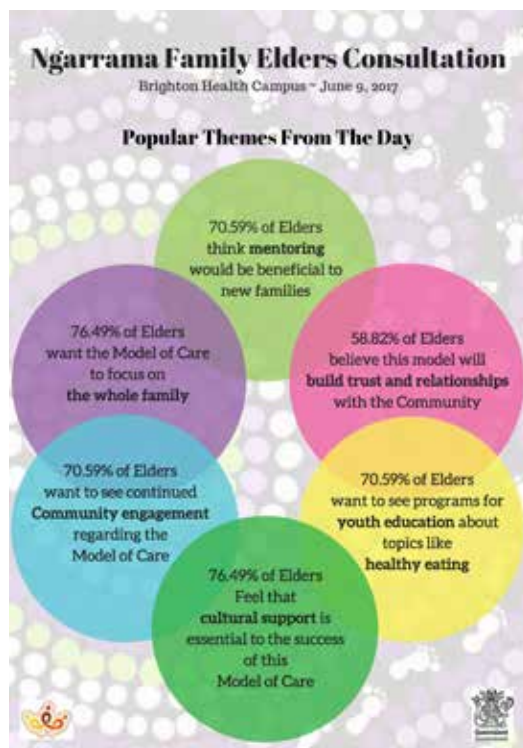
A few of our favourite quotes from the day:

“Ngarrama is a deadly community based organisation. I can see the dedication and support for communities. The trust and sensitivity is seen in your community and thank you for inviting us.”

“I do see Ngarrama Family Service on their way to building trust and relationships with the community

by engaging with members of the community, in particular the young mums and bubs, and including the Elder’s input. Wonderful service - keep it up.”

“I see the value in what you are offering to the community because it is an opportunity for families to establish long-term sustainable support post Ngarrama Maternity. There is also an opportunity for services to access families.”



Reconciliation Week

Hospital staff take to the stairs in recognition of Reconciliation

The theme for National Reconciliation Week (27 May–3 June), ‘Let’s Take the Next Steps’, was quite fitting for Redcliffe hospital staff as they took part in the inaugural Reconciliation Race to the Roof event.

Organised by Indigenous Hospital Liaison Officer, Rox-anne Currie, the event was a fun way to raise awareness about the significance of the week with two major milestones in Australia’s reconciliation journey celebrated: 50 year anniversary of

the 1967 referendum and 25 years since the historic Mabo decision.

Rox-anne said she hoped the celebration would become an annual event at Redcliffe Hospital.

“Cultural events such as Reconciliation Week are essential to bridging the gap between our Indigenous and non-Indigenous staff. I am pleased to see our hospital staff jump on board with the race and to walk towards the path of reconciliation together,” Rox-anne said.



Race winner Dominic Clarke (pictured left) from physiotherapy won the stair race in an impressive 25.25 seconds which was equalled on the day by Mark Budd (pictured right) who graciously allowed the trophy and bragging rights to go to Dominic.

The Royal Brisbane and Women’s Hospital Market Day

Celebrations were held at Royal Brisbane and Women’s Hospital to mark the significance of National Reconciliation Week.

The hospital held a Reconciliation Art Exhibition showcasing local works from upcoming Aboriginal and Torres Strait Islander artists at the ArtSpace on the ground floor.

The annual Market Day held on the 31st of May attracted great interest from hospital staff and patients, with various stalls selling various traditional and contemporary Aboriginal and Torres Strait Islander arts and crafts.



Scott Moore, a descendant of the Wadi-Wadi tribe from the Yuin nation from the South Coast of New South Wales displays his Lilly Pilly Inspirations artwork.



Stephen Hogarth from Hogarth Arts with his traditional artwork and display.

CISS Reconciliation Shield

There was plenty of colour and cheer as scores of CISS staff united for an afternoon of reflection and games at Brighton Health Campus on June 2 to mark National Reconciliation Week.



Food Services Staff at Brighton Health Campus were the official cheerleaders on the sidelines.

The event provided an opportunity to recognise a formal commitment to work towards achieving reconciliation between Indigenous and non-Indigenous Australians, and included the launch of the CISS Statement of Commitment to Reconciliation.

The games capped off with a display off force on the soccer pitch from a team of Brighton physiotherapists, who dominated the field to take home the second annual CISS Reconciliation Shield.



Brighton Physiotherapists win the annual Reconciliation Shield.

CISS Business Manager Michael Elliott and Director of Nursing Andy Carter took part in the soccer match.



Deadly Awards

As part of the Aboriginal and Torres Strait Islander Health Unit cultural leadership and governance program, staff nominate team members for bimonthly 'deadly awards' in recognition of going above and beyond in their roles.

The program allows staff members to be recognised by their peers and for all the deadly work they do with supporting Aboriginal and Torres Strait Islander patients when they visit MNHHS hospitals and facilities.

The following staff members were awarded with deadly recognition at the recent All Staff Forum:

- The Prince Charles Hospital Indigenous Hospital Liaison Officer Mark Budd for supporting his co-workers and backfilling at Royal Brisbane and Women's Hospital.
- The Prince Charles Hospital Indigenous Hospital Liaison Officer Michelle Pieper for supporting hospital services with backfilling.

- Redcliffe Indigenous Hospital Liaison Officer Rox-anne Currie for going above and beyond to coordinate significant cultural events within Redcliffe Hospital – Close the Gap Day and Reconciliation Week.
- Executive Support Officer Vaughan Travers for supporting all Unit staff and assisting with cultural events.

- Improving the Patient Journey Officer Temiah Henaway for working tirelessly to support her co-workers with transport at RBWH for patients and escorts.
- Cultural Capability Officers Gene Blow and Henry Nona, and Caboolture Hospital Liaison Officer Stella Laidlaw, for delivering outstanding cultural training for junior doctors at Caboolture Hospital.



Cultural Capability Officer Gene Blow, Caboolture Indigenous Hospital Liaison Officer Stella Laidlaw and A&TSIHU Director Paul Drahm.



TPCH Indigenous Hospital Liaison Officer Mark Budd.



Improving the Patient Journey Officer Temiah Henaway.

NAIDOC Week 2017 Redcliffe Hospital

Staff, patients and community members enjoyed a traditional BBQ breakfast event at Redcliffe Hospital on July 14.

A didgeridoo performance and stalls were set-up within the hospital staff courtyard, as guest's sampled home-made damper and kangaroo sausages.

Redcliffe Hospital Director Louise Oriti welcomed guests to the celebration including Queensland Attorney General The Honourable Yvette D'Ath and MNHHS Board Member Associate Professor Cliff Pollard AM.



Redcliffe Ngarrama Indigenous Health Worker Jodi Dyer.



MNHHS Board Member Associate Professor Cliff Pollard AM and Attorney General and Minister for Justice and Minister for Training and Skills and State Member for Redcliffe The Honourable Yvette D'Ath.



L-R: MNHHS Board Member Professor Cliff Pollard, A&TSIHU Director Paul Drahm, Attorney General Yvette D'Ath, Uncle Robert West and Redcliffe Hospital Director Louise Oriti.



L-R Cultural Capability Officer Gene Blow, Mark Robson, Uncle Dennis Bobongi and Aunty Lynne Matsen.



Redcliffe Hospital Service Improvement Officer Neressa Johnston with her two children Kiah and Manu.



Home-made wood fired damper.

NAIDOC Week 2017 *(continued)*

Caboolture Family Fun Day

Metro North Hospital and Health Service held its first community NAIDOC Week celebration at St Columban's College in Caboolture on July 4.

The event was designed as a family fun day for the Aboriginal and Torres Strait Islander communities on the north side including Zillmere, Caboolture and Redcliffe.

Guests enjoyed traditional dancing, art and cultural workshops, traditional games, language and storytelling.



Gubbi Gubbi Aboriginal Dance Group and Keriba Mabaigal Torres Strait Islander Women's group.



Over 40 community stallholders took part at the Caboolture Family Fun Day, providing health promotion advice and service details to Aboriginal and Torres Strait Islander consumers.



Ngarrama Project Lead Kelly Smith (pictured centre) with her children Amelia, Noah and Oliver with husband Daniel (back) and Ngarrama support Officer Erin Sutton (left).



Jihias King from Caboolture.



Staff from the MNHHS Aboriginal and Torres Strait Islander Health Unit.



Cian from Caboolture with her children Dante, Armani, Allira-May and baby Aurora.



Ino, William and Michelle from the Institute of Urban Indigenous Health Care Connect.



Uncle Darryl Lingwoodock officially delivered the Welcome to Country for guests.



Janelle, Kerri and Anne-Marie from Metro North Oral Health got into the NAIDOC spirit wearing the official shirts and setting up a deadly stall for the children to enjoy.

Kilcoy celebration at Yowie Park

The Kilcoy District Cultural Village Committee coordinated the first community celebration for NAIDOC Week held at Yowie Park in Kilcoy on Sunday 2 July.

The event featured a performance from Aboriginal dance troupe the Deadly Maardars, language and storytelling workshops, face painting and a traditional BBQ with bush meats.

Metro North Hospital and Health Service Aboriginal and Torres Strait Islander Health Unit and Somerset Regional Council proudly supported the event.

The Deadly Maardars Dance Troupe.



Caboolture Indigenous Hospital Liaison Officer Stella Laidlaw pictured (centre) with community members.

Northside NAIDOC at Koobara

Members of the Aboriginal and Torres Strait Islander Health Unit participated at the annual community gathering at the Koobara Kindergarten grounds in Zillmere.

The team used the opportunity to liaise and network with local community members throughout the day and promote the Indigenous Acute & Primary Care team, Sexual Health Team, Indigenous Hospital and Ngarrama services as well as have an information stand to encourage health awareness.

Celebrating NAIDOC week at Koobara gave the community an opportunity to learn about history and traditions and meet local service providers.

The NAIDOC committee planned many events including jumping castles, face painting, craft stations and information stalls from local government and non-government organisations. The day included the usual sausage sizzle from Koobara kindy and entertainment was provided by local dancers and musicians.

Patricia Kennedy from our MN A&TSI Health Unit sits on the Northside NAIDOC Committee representing Queensland Health in the planning stages of the event. The Aboriginal and Torres Strait Islander Health Unit wishes to congratulate the NAIDOC committee for another great community driven NAIDOC event.

The NAIDOC committee reports that approximately 3000 community members attended throughout the day and the committee will be looking at a larger venue for the NAIDOC event in the coming years.



Northside NAIDOC Committee members Julian Hunt and Patricia Kennedy with MNHHS Board Member Mike Gilmore and A&TSIHU Director Paul Drahm.



Some of the Northside NAIDOC Committee Bev Hickey, Pat Kennedy and Julian Hunt.



Proud Ngarrama mum Elizabeth Georgetown with her son Levi.



Members of the Ngarrama maternity service at The Royal Brisbane and Women's Hospital.

The Prince Charles Hospital

A display within the Thoracic Department at The Prince Charles Hospital was held in recognition of NAIDOC Week.

The display was initiated by Clinical Nurse Anita Gorissen to raise awareness about NAIDOC Week for both staff and patients.

Thoracic Department Clinical Nurse Rekha Hakim said the display was part of the thoracic ward eat, walk, engage strategy for patients.

“Each month we have a different display to engage with our patients. The purpose is to create awareness about the services available within The Prince Charles Hospital,” she said.

“It’s important, particularly for our Indigenous patients, to create a continuity of care and awareness about the services available within the community.”



Pictured left – right: Mark Budd, Liz Pardede, Margaret Porra, Kerry Davenport, Darren Steed, Lynda Rollasan, Brianna Cook, Christine Rowe (patient in purple shirt) and Rekha Hakim.



Chermside Community Health Centre

Chermside Community Health Centre Administrative Officer Angela James prepared an information display for patients and staff to enjoy during NAIDOC Week.

IN THE NEWS

We can revive our story if we blend Indigenous knowledge with western nutrition

In our songs and dances, there are some parts that talk about how to get food from the bushland, the open land, from the sand dunes, the beaches and the sea. Everything has been laid out carefully in our songs and dances; our guidelines. Woven into our stories are our rules of how to hunt, the process that explains how to cook and in these ways everything was told in the songs and dances – everything!

<https://www.theguardian.com/commentisfree/2017/jul/18/we-can-revive-our-story-if-we-blend-indigenous-knowledge-with-western-nutrition>

More Indigenous midwives equals strong cultural connection for mothers and babies: expert

There are calls for more Indigenous midwives as experts say Aboriginal and Torres Strait Islander mothers-to-be connect on a deeper level with midwives from the same race. Only one per cent of Australian midwives are of an Aboriginal or Torres Strait Islander background, despite six per cent of all Australian births being Indigenous.

<http://www.sbs.com.au/news/article/2017/07/10/more-indigenous-midwives-equals-strong-cultural-connection-mothers-and-babies>

Indigenous-led program to tackle suicide

The implementation of an Indigenous-led suicide intervention program will begin in Queensland's rural and remote communities in July. Researchers from The University of Queensland have consulted extensively with Indigenous communities to develop relevant and sustainable training programs for 'gatekeepers'.

<https://www.uq.edu.au/news/article/2017/06/indigenous-led-program-tackle-suicide>

Aboriginal health retreat using bush foods and medicines a 'promising' model

Wild yams and fish, traditional bush medicines, Aboriginal herbal remedies and even sand massages are all part of a holistic health program designed to turn back an "epidemic" of chronic disease in north-east Arnhem Land in the Northern Territory. A remote Indigenous-led health program which has shown "impressive" results could be rolled out as a model to reduce high rates of chronic disease among Indigenous people, according to a public health expert.

The Hope for Health project was started by volunteers and Aboriginal Yolngu people on Elcho Island, aiming to tackle chronic health problems by incorporating traditional health practices and knowledge with western medicine.

<http://www.abc.net.au/news/2017-06-29/elcho-island-health-retreat-promising-model-for-improving-health/8661344>

Closing the Gap: Queensland's positive Indigenous health model eyed for national rollout

What strikes you when you enter one of the Institute for Urban Indigenous Health (IUIH) clinics is the joy of the patients — elders, men and women, are using the gym, to the constant encouragement of their trainers. Dotted all over south-east Queensland, these are one-stop shops for health for Indigenous people which are making waves within the Indigenous community.

<http://www.abc.net.au/news/2017-07-02/closing-the-gap-seq-approach-touted-for-national-rollout/8668734>

Blind elder's crusade to reduce diabetes in Indigenous communities

Bundjalung-Biripi elder Mary Hooker is on a mission to reduce the rate of diabetes in Indigenous communities after she was declared legally blind. Ms Hooker, 59, developed type 2 diabetes 33 years ago, but said she did not take doctors seriously when they warned her of the dangers posed by the disease.

<http://www.abc.net.au/news/2017-07-06/blind-elder-on-crusade-reduce-indigenous-diabetes/8685092>

NAIDOC Week: Bush tucker calendar promotes healthy eating in Indigenous community

Bush tucker is being used to encourage people to eat more fruit and vegetables. The Gold Coast Aboriginal and Torres Strait Islander Health Service has launched its annual calendar featuring local bush tucker foods. The 12-month calendar has recipes featuring native foods such as kangaroo, lemon myrtle, finger lime, lemon aspen, warrigal greens, wattle seed, lilli pilli, pig face and pippis.

<http://www.abc.net.au/news/2017-07-07/naidoc-bush-tucker-calendar-gold-coast/8689114>

Minister Scullion: Additional \$1.6m for Indigenous language interpreters

The Coalition Government is providing the National Accreditation Authority for

Translators and Interpreters (NAATI) with an additional \$1.6 million to expand its successful Indigenous Interpreting Project. Indigenous language interpreters play an essential role in ensuring First Australians have access to a fair legal system, as well as government and community services.

<http://www.indigenous.gov.au/news-and-media/announcements/minister-scullion-additional-16m-indigenous-language-interpreters>

Young Doctors: An Indigenous-led health program for kids

The Indigenous-led Young Doctors program trains primary school students to be health ambassadors in their local communities. In the Dughutti language (the local Indigenous language of Kempsey), 'Dhalayi' means 'young' and since 2013, Dhalayi Doctors has been running as part of a broader, Indigenous-led health program throughout Australia. This year, 400 kids will graduate with know-how about healthy eating, safe food prep, body hygiene and other essential life skills.

<http://www.sbs.com.au/news/thefeed/article/2017/05/16/young-doctors-indigenous-led-health-program-kids>

Minister Wyatt: Indigenous health programs boost in the Federal Budget

The Turnbull Government has continued its commitment to provide better health services for Indigenous Australians with a funding boost in the Federal Budget. The Minister for Indigenous Health, Ken Wyatt, said that Budget measures will improve the health of Aboriginal and Torres Strait Islander people and the Government is now investing \$3.6 billion over four years from 2017-18 for the Indigenous Australians' Health Program, representing an increase of \$724 million compared to expenditure over the previous four years.

<http://www.indigenous.gov.au/news-and-media/announcements/minister-wyatt-indigenous-health-programs-boost-federal-budget>

Meet Dr Anthony Murray, who is set to become Australia's first Indigenous orthopaedic surgeon

Growing up in central Queensland, the son of a barrister and a solicitor, Anthony Murray was always encouraged to try, to do his best, and to succeed. When his brother David went into medicine, Anthony followed in his footsteps. Last year, David became Australia's first Indigenous general surgeon.

UPCOMING EVENTS

Now Anthony is an orthopaedic registrar, and on his way to becoming the country's first Indigenous orthopaedic surgeon.

<http://www.sbs.com.au/topics/life/health/article/2017/05/16/meet-dr-anthony-murray-who-set-become-australias-first-indigenous-orthopaedic>

Can Artificial Intelligence help close the indigenous healthcare gap?

Improving the health and welfare of Indigenous Australians has been a longstanding challenge for our nation. Earlier this year, the government's ninth annual Closing the Gap report showed only one of the seven targets will be met this year. And unless considerable strides are made to close the chasm, we are at a real risk of moving backward instead of forward.

<http://www.theaustralian.com.au/business/technology/opinion/can-artificial-intelligence-help-close-the-indigenous-healthcare-gap/news-story/f384bde92c520e59d98413f21a91a55f>

The midwives breaking the cycle of distrust

James Burns has been to every prenatal appointment with his fiancée Kelly Jenkins. She's three days past her due date and her little boy is kicking away inside her swollen belly as she sits next to James in a hospital consulting room. The couple are surrounded by images of maternity scenes intimately more familiar to James than the ubiquitous stock images of white pregnant women and babies.

<http://www.illawarramercury.com.au/story/4614171/the-midwives-breaking-the-cycle-of-distrust/?cs=7>

Myths about musculoskeletal pain and Aboriginal Australians prevent high quality care

Musculoskeletal pain (such as low back pain, osteoarthritis, neck, knee and shoulder pain) is the number one cause of disability in Australia and affects 28% of Australians. It is one of nine national priorities in health. Some 20% of Aboriginal Australians suffer long term musculoskeletal pain and to date it has received little attention or recognition.

<http://theconversation.com/myths-about-musculoskeletal-pain-and-aboriginal-australians-prevent-high-quality-care-76390>

9 August 2017

International Day of the World's Indigenous Peoples

The International Day of the World's Indigenous Peoples is observed on August 9 each year to promote and protect the rights of the world's Indigenous population.

This event also recognises the achievements and contributions that indigenous people make to improve world issues such as environmental protection.

It was first pronounced by the General Assembly of the United Nations in December 1994, marking the day of the first meeting of the UN Working Group on Indigenous Populations of the Sub-commission on the Promotion and Protection of Human Rights, in 1982.

6 September 2017

Indigenous Literacy Day

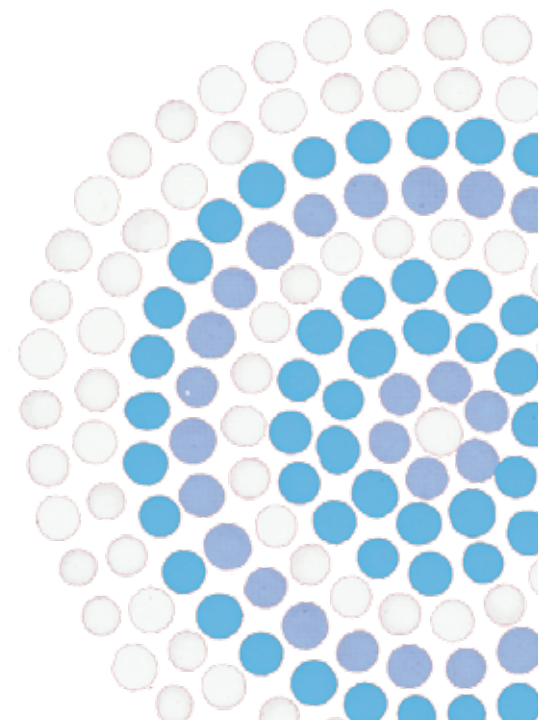
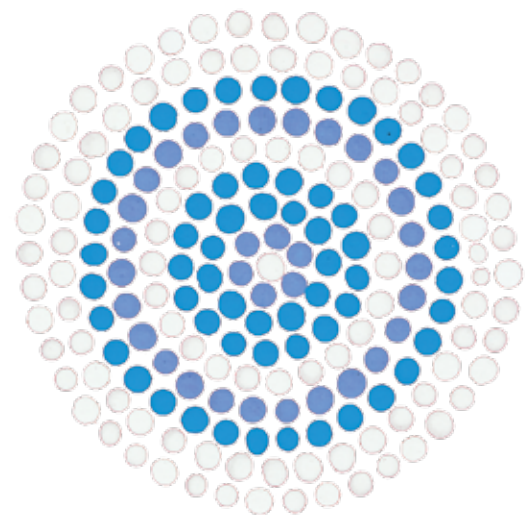
Indigenous Literacy Day aims to help raise funds to boost literacy levels and improve the lives and opportunities of Indigenous Australians living in remote and isolated regions.

This day needs your support to help raise funds to buy books and literacy resources for children in these communities.

13 September 2017

Anniversary of the UN Declaration on the Rights of Indigenous People

The United Nations Declaration on the Rights of Indigenous Peoples was adopted by the United Nations General Assembly during its 61st session at UN Headquarters in New York City on 13 September 2007.





A Day in the Life of Ann Baxter

1. What does your role involve?

Currently I am enjoying working with the Ngarrama Family Community Project team led by Kelly Smith where our role is to assist with the development of a sustainable flexible model of care for the Ngarrama Family Community Service.

I have worked in the child and family community health space for many years, and Aboriginal and Torres Strait Islander Health Unit for the past 5. I enjoy sharing my thoughts and experiences in this area for advancement of the Ngarrama Family model. I always need challenges with my work, as I spend so much time here. Being part of the Ngarrama Family community project team has certainly achieved this. We differ in opinion on certain matters, thank goodness otherwise it would be boring; I always find it amazing how different people are in their thinking both professionally and personally. This project team clicks.

The model will operate as an all-inclusive navigation and transition service for Aboriginal and Torres Strait Islander women and their families, from pregnancy through to when their child starts school. The service framework is based upon assisting the patient journey through continuity of care to ensure cultural capacity and safety through partnership models and to reduce the risk factors for Indigenous children, by supporting a healthy start to life.

2. The new Ngarrama Family model of care will be operational within the next six months, how do you anticipate the new service will help eligible Aboriginal and Torres Strait Islander families?

I have always deeply respected and adored the Ngarrama name, from the first time I heard the meaning behind it "Guardian Birth Spirit". There is the beauty right there. I feel Aboriginal and Torres Strait Islander families trust this service name. The Ngarrama Family model offers flexible options for families; by assisting them to transition and navigate the many service options on offer within community and the health arena, Ngarrama Family being one of these options.

3. The new model of care will focus on a healthy start to life for Indigenous children, you recently attending the First 1000 Days workshop in Caboolture. What did you learn from the initiative?

We need to be thinking about the baby's health pre conception. What mums and dads journey is like pre conception and pre parenting impacts on a child's start to life also. First 1000 Days was thought provoking around thinking about the baby's health before its presence in the world.

The Australian Model of the First 1000 Days is an Indigenous-led initiative. The 1000 days between a woman's pregnancy and her child's 2nd birthday offer a unique window of opportunity to build healthier and more prosperous futures. Here I met many health professionals, elders, community members in the Mums and Bubs space across Queensland and interstate.

4. What are some of your highlights working with Queensland Health?

Flying to Sydney with a spirited patient who needed a heart transplant. Working in a 16 bed country hospital, I learnt so much. Best midwifery experience for me too.

A recent highlight for me was working as a Public Health Nurse for 5 years, where my favourite Benjamin Franklin quote: *An ounce of prevention is worth a pound of cure*, was implemented daily by protecting health, preventing disease, illness and injury in the community. I have also worked in many Primary Health Care community services with a special interest in immunisation and prickling babies on time.

I've always worked with families on the principle: a little support early is preferable to a lot of fixing up afterward. A fond memory for me is the first client I ever home visited with Ngarrama, and the relationship that developed over two of her pregnancies. I attained so much wisdom and knowledge from this mum regarding Aboriginal family culture and connection to country. This woman was a straight shooter who told it like it was and was not to be crossed. I remember saying to her "you used to scare the 'bejeezers' out of me when I first met you. She just chuckled and calmly responded 'a lot of people say that to me'.

5. As a proud mother of four, what advice do you provide to young mothers and families?

Go with your gut feeling. You've got to ask for help sometimes. You know as a mum when you're falling off the wagon and not parenting well. If you're ok, you will do the best for the kids, which is all you can do at the time.

Always say 'I love you' to your children, it pays off. Show them your emotions: even anger, it keeps it real, and that not everyone in the world is going to be nice to you. Don't get too far ahead of yourself, worrying about how they are going to turn out, particularly when their behaviour is driving you nuts on a particular week. Just be consistent in your parenting approach. Best advice from my Grandmother is "when your child states 'I hate you' don't take it personally. I have just responded with 'that's a shame cause, I love you'."



6. Did you always want to be a nurse and specialise in community/Indigenous health?

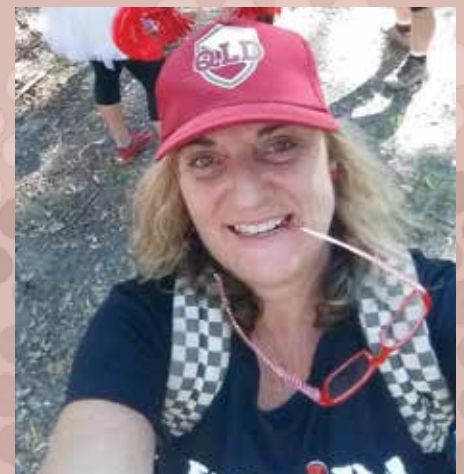
No. I did work experience at RBWH in high school, enjoyed it, and thought I can do this, so trained at Princess Alexandra Hospital. Looked for a change after doing my midwifery and child health training so worked as a Medical Drug Representative for 5 years, fun, travelled to North Queensland. Once I commenced child health, I knew I would relish in this career path.

7. What do you like doing outside of work?

Walks, beach, camping, boogie boarding, bush walks, live local bands, attending rugby league local club games, volunteering. Anything I will stare at - an ant on the pavement. Everything seems so simple and alive to me outdoors.

8. Finally, you recently completed the Kokoda 48km challenge on the Gold Coast hinterland. What was the experience like?

Loved it. Always thought it would be amazing to complete Kokoda PNG, Kokoda Brisbane Challenge presented first. It took 15 hours, 38 minutes and 8 seconds, went with a group of friends as a team. (Aim was start as a team and finish as one). Raised \$600 for Kokoda Youth Foundation who support vulnerable youth. I think it is important to push yourself and embrace the mental and/or physical exhaustion associated with this. Achieving and conquering definitely ignites the soul and is my Baxter buzz. And I want to burn for as long as this earth will have me.



Ann Baxter completing the Gold Coast Kokoda challenge.

RECIPE

Apricot & Pistachio Chicken Patties



Heart Friendly
High Fibre
Iron Rich
Lactose Free
Low Fat

To Prep: 10 minutes
To Cook: 10 minutes

INGREDIENTS (for 4 serves)

- 500g chicken mince
- 3 slices multi-grain bread
- 90g pistachio nuts
- 160g dried apricots

What to do

1. In a bowl, combine the mince, grated bread, chopped pistachios and diced apricots, and season with cracked pepper.
2. Roll into 4 patties and place on a baking paper-lined baking tray.
3. Chill for 20 minutes, then place into a non-stick grill pan over medium heat. Cook the patties for 4 to 5 minutes on each side or until golden and cooked through.

Source – Diabetes Australia <https://www.diabetesaustralia.com.au/recipes/11232>

Word of the Month:

“Mibunn”

Meaning: Eagle

Language:
Yugambeh

Location:
Between the Logan and Tweed Rivers and west to Beaudesert and Rathdowney

Source:
State Library of Queensland





ARE YOU OF ABORIGINAL OR TORRES STRAIT ISLANDER ORIGIN?

- ✓ Staff please always ask.
- ✓ You need to ask everyone!
- ✓ You cannot rely on appearance.
- ✓ The only sure way to find out is to ask.
- ✓ Please help us to improve the health of
Aboriginal and Torres Strait Islander Queenslanders.

We welcome your feedback, contributions, story ideas and details on any upcoming events.

Please contact Aboriginal and Torres Strait Islander Health Unit Communications Manager Renee Simon at Renee.Simon@health.qld.gov.au or phone (07) 3139 3231.

