Aboriginal and Torres Strait Islander Health Workforce Working Group

Annual Report to the Health Workforce Principal Committee

2015
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1.0 Introduction
This is the second Annual Report prepared by the Aboriginal and Torres Strait Islander Health Workforce Working Group (ATSIHWWG) for the Health Workforce Principal Committee (HWPC).

ATSIHWWG is a subcommittee of the HWPC of the Australian Health Ministers’ Advisory Council (AHMAC) and is required to report annually to the HWPC.

2.0 Background
ATSIHWWG has an important role, both as a forum that brings together key stakeholders involved in Aboriginal and Torres Strait Islander health workforce and training, and also as an advisory group informing work in relation to growing and supporting the Aboriginal and Torres Strait Islander health workforce.

Member organisations of ATSIHWWG are appointed by AHMAC and include:
- ACT Health
- NSW Ministry of Health
- NT Health
- Department of Health, Queensland
- Department for Health and Ageing, SA
- Department of Health and Human Services, Tasmania
- Department of Health and Human Services, Victoria
- Department of Health, WA
- National Aboriginal Community Controlled Health Organisation
- National Aboriginal and Torres Strait Islander Health Worker Association
- Australian Indigenous Doctors’ Association
- Indigenous Allied Health Australia
- Congress of Aboriginal and Torres Strait Islander Nurses and Midwives
- Department of Health, Commonwealth

A representative from the National Aboriginal and Torres Strait Islander Health Standing Committee, a subcommittee of AHMAC, is now a regular observer at ATSIHWWG meetings.

ATSIHWWG’s work plan includes the following initiatives to help address the under representation of Aboriginal and Torres Strait Islander peoples in health professions:
- identifying best practice in the design and delivery of programs to promote culturally-safe health care;
- exploring ways to strengthen and sustain the Aboriginal and Torres Strait Islander Health Worker workforce;
- considering education pathways and investigating the high attrition rates for Aboriginal and Torres Strait Islander students studying health courses; and
- reviewing the National Aboriginal and Torres Strait Islander Health Workforce Strategic Framework 2011-2015.
3.0 Report Structure
The report presents information on the numbers and proportions of Aboriginal and Torres Strait Islander peoples working and training in health, as follows:
- Aboriginal and Torres Strait Islander peoples represented in each of the health professions: Doctors; nurses; dental workers; allied health workers; and Aboriginal and Torres Strait Islander Health Workers and Practitioners.
- Students commencing and completing studies in medicine, nursing and allied health.
- Aboriginal and Torres Strait Islander peoples working in each jurisdiction; and
- Health department staff who have undertaken cultural safety training.

Additional information provided by ATSIHWWG members on programs to support the Aboriginal and Torres Strait Islander health workforce has been provided at Appendix A.

4.0 Notes on the data and its preparation
Data for the ATSIHWWG report were supplied from a range of sources. Data presented in the report reflect the latest available data from the following sources:
- Australian Bureau of Statistics 2011 census data;
- State and territory health departments;
- Medical Deans Australia and New Zealand student statistics collection;
- Australian Government Department of Education and Training;
- Australian Health Practitioner Regulation Agency (AHPRA) registration data;
- National Health Workforce Data Sets (NHWDS). The NHWDS combines data from AHPRA with health workforce survey data collected when annual registrations are renewed. The mandatory registration process is administered by AHPRA and includes an optional survey that collects additional demographic and workforce information.

Higher education data reported by the Australian Government Department of Education and Training is subject to a confidentialisation process in situations that involve data cells of less than five individuals. The data may be reported as ‘<5’ or, in cases where data reported in other cells would allow confidentialised data to be calculated, some data may not be provided. These data are indicated where relevant.

This annual report only includes workforce data from 2013 because:
- Of the 12 registered allied health professions, the last four were included under the National Registration and Accreditation Scheme (NRAS) in July 2012: Aboriginal and Torres Strait Islander Health Practitioners; Chinese medicine practitioners; medical radiation practitioners and occupational therapists. As a result, the complete data for all registered health professions are only available from 2013.
- The NHWDS combines AHPRA registration data and workforce survey data. AHPRA only began to include ‘country of birth’ data from 2013 for allied health professions.
4.1 Data quality issues

The quality of the ATSIHWWG report, as a single reference point covering the Aboriginal and Torres Strait Islander health workforce, is dependent on the provision and collation of comprehensive information from all contributors. Data templates and specifications defining each data element and the periods covered are being developed for all areas of the report.

An analysis of NHWDS data has been undertaken by the Workforce Data Analysis Section within the Department of Health, revealing that a high proportion of respondents who indicated that they are “of Aboriginal and Torres Strait Islander origin” were born overseas, including almost a third of medical professionals. While it is recognised that a small number of health professionals who are of Aboriginal and/or Torres Strait Islander descent may have been born overseas, where a respondent has indicated that they are both of Aboriginal and Torres Strait Islander descent and born overseas, these respondents have been excluded from the sample group.

From 1 July 2016, the Department of Health will assume responsibility from the Australian Institute of Health and Welfare (AIHW) for the custodianship of the NHWDS. ATSIHWWG Members are working with the Department of Health to develop alternative ways of identifying respondents who are of Aboriginal and/or Torres Strait Islander descent, in order to avoid ambiguity in the collection of data in future workforce surveys.

5.0 Aboriginal and Torres Strait Islander peoples in the health workforce

Increasing the size of the Aboriginal and Torres Strait Islander health workforce is fundamental to closing the gap in Indigenous life expectancy.

Analysis of the 2011 census data indicates that, at that time, there were around 8,500 Aboriginal and Torres Strait Islander people employed in health-related occupations. Between 1996 and 2011 the rate of Indigenous Australians employed in the health workforce increased from 96 per 10,000 to 155 per 10,000.\(^1\)

In 2011, approximately 3.4% of the non-Indigenous population of Australia were employed in the health workforce; however, only approximately 1.6% of the Indigenous population was employed in health-related occupations.

In 2014, the health occupations with the largest number of Aboriginal and Torres Strait Islander employees were nursing, followed by nursing support and personal care workers and Aboriginal and Torres Strait Islander Health Workers. The health occupations with the largest gap between rates of Indigenous and non-Indigenous employees were nurses and medical practitioners.

Data presented in this section are developed from estimates derived from the National Health Workforce Data Sets for each profession. Data are collected via registration forms and a survey instrument administered by the Australian Health

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\(^1\) Aboriginal and Torres Strait Islander Health Performance Framework 2014 Report
Practitioner Regulation Agency, in conjunction with the annual registration renewal process. Respondents, who indicated that they are working in Australia but have an overseas address, have been counted in the 'Other Territories' (OT) column. Practitioners who did not adequately describe, or failed to state, whether they are of Aboriginal and Torres Strait Islander descent have been excluded.

5.1 Aboriginal and Torres Strait Islander peoples working in registered health professions in Australia

The registered health professions in Australia are:
- Aboriginal and Torres Strait Islander Health Practitioners
- Chinese Medicine Practitioners
- Chiropactors
- Dental Practitioners
- Medical Practitioners
- Medical Radiation Practitioners
- Nurses and Midwives
- Occupational therapists
- Optometrists
- Osteopaths
- Pharmacists
- Physiotherapists
- Podiatrists
- Psychologists

Table 5.1(a): Aboriginal and Torres Strait Islander peoples working in registered health professions - 2013 to 2014

<table>
<thead>
<tr>
<th></th>
<th>National</th>
<th>NSW</th>
<th>VIC</th>
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</thead>
<tbody>
<tr>
<td>2013</td>
<td>3430</td>
<td>1249</td>
<td>422</td>
<td>821</td>
<td>238</td>
<td>234</td>
<td>147</td>
<td>281</td>
<td>35</td>
<td>&lt;5</td>
</tr>
<tr>
<td>2014</td>
<td>3744</td>
<td>1383</td>
<td>462</td>
<td>930</td>
<td>257</td>
<td>227</td>
<td>163</td>
<td>270</td>
<td>49</td>
<td>&lt;5</td>
</tr>
</tbody>
</table>

Source: National Health Workforce Data Set (NHWDS): 2013 and 2014

Table 5.1(b): Aboriginal and Torres Strait Islander peoples working in registered health professions as a proportion (%) of total working registered health professionals - 2013 to 2014

<table>
<thead>
<tr>
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<th>NSW</th>
<th>VIC</th>
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<th>NT</th>
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</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>0.72</td>
<td>0.87</td>
<td>0.33</td>
<td>0.88</td>
<td>0.49</td>
<td>0.57</td>
<td>1.32</td>
<td>5.00</td>
<td>0.42</td>
<td>2.22</td>
</tr>
<tr>
<td>2014</td>
<td>0.75</td>
<td>0.92</td>
<td>0.35</td>
<td>0.95</td>
<td>0.49</td>
<td>0.53</td>
<td>1.42</td>
<td>4.61</td>
<td>0.55</td>
<td>1.44</td>
</tr>
</tbody>
</table>

Source: National Health Workforce Data Set (NHWDS): 2013 and 2014

5.2 Aboriginal and Torres Strait Islander doctors

The number of registered Aboriginal and Torres Strait Islander doctors has doubled in the past decade, boosting efforts to improve the health of Aboriginal and Torres Strait Islander communities. However, Aboriginal and Torres Strait Islander peoples remain under-represented in the medical workforce, making up only 0.33% of the Australian medical workforce in 2014.
Table 5.2(a): Aboriginal and Torres Strait Islander medical practitioners in the Australian workforce - 2013 to 2014

<table>
<thead>
<tr>
<th></th>
<th>National</th>
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<th>SA</th>
<th>TAS</th>
<th>NT</th>
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<th>OT</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>226</td>
<td>77</td>
<td>30</td>
<td>65</td>
<td>21</td>
<td>14</td>
<td>&lt;5</td>
<td>9</td>
<td>6</td>
<td>&lt;5</td>
</tr>
<tr>
<td>2014</td>
<td>261</td>
<td>94</td>
<td>37</td>
<td>66</td>
<td>27</td>
<td>14</td>
<td>&lt;5</td>
<td>11</td>
<td>8</td>
<td>0</td>
</tr>
</tbody>
</table>

Source: National Health Workforce Data Set (NHWDS): Medical Practitioners 2013 and 2014

Table 5.2(b): Aboriginal and Torres Strait Islander medical practitioners in the Australian workforce as a proportion (%) of total medical workforce - 2013 to 2014

<table>
<thead>
<tr>
<th></th>
<th>National</th>
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<th>VIC</th>
<th>QLD</th>
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<th>TAS</th>
<th>NT</th>
<th>ACT</th>
<th>OT</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>0.30</td>
<td>0.31</td>
<td>0.16</td>
<td>0.44</td>
<td>0.29</td>
<td>0.24</td>
<td>0.18</td>
<td>0.99</td>
<td>0.41</td>
<td>6.67</td>
</tr>
<tr>
<td>2014</td>
<td>0.33</td>
<td>0.37</td>
<td>0.19</td>
<td>0.42</td>
<td>0.34</td>
<td>0.23</td>
<td>0.23</td>
<td>1.12</td>
<td>0.53</td>
<td>0.00</td>
</tr>
</tbody>
</table>

Source: National Health Workforce Data Set (NHWDS): Medical Practitioners 2013 and 2014

5.3 Aboriginal and Torres Strait Islander nurses and midwives

Nurses and midwives are a vital part of the health workforce, currently accounting for almost 57% of the entire health workforce.

Aboriginal and Torres Strait Islander peoples are under-represented in the nursing and midwifery workforce. In 2014, the representation of Aboriginal and Torres Strait Islander nurses and midwives was only 0.92% of the total nursing and midwifery workforce in Australia, although this is an improvement from 0.86% in 2013.

Table 5.3(a): Aboriginal and Torres Strait Islander nurses and midwives in the Australian workforce - 2013 to 2014

<table>
<thead>
<tr>
<th></th>
<th>National</th>
<th>NSW</th>
<th>VIC</th>
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<th>ACT</th>
<th>OT</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>2473</td>
<td>970</td>
<td>326</td>
<td>610</td>
<td>158</td>
<td>193</td>
<td>127</td>
<td>64</td>
<td>23</td>
<td>&lt;5</td>
</tr>
<tr>
<td>2014</td>
<td>2730</td>
<td>1069</td>
<td>359</td>
<td>706</td>
<td>164</td>
<td>182</td>
<td>141</td>
<td>76</td>
<td>31</td>
<td>&lt;5</td>
</tr>
</tbody>
</table>

Source: National Health Workforce Data Set (NHWDS): Nurses and midwives 2013 and 2014

Table 5.3(b): Aboriginal and Torres Strait Islander nurses and midwives in the Australian workforce as a proportion (%) of total nursing and midwifery workforce - 2013 to 2014

<table>
<thead>
<tr>
<th></th>
<th>National</th>
<th>NSW</th>
<th>VIC</th>
<th>QLD</th>
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<th>TAS</th>
<th>NT</th>
<th>ACT</th>
<th>OT</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>0.86</td>
<td>1.19</td>
<td>0.42</td>
<td>1.09</td>
<td>0.55</td>
<td>0.72</td>
<td>1.77</td>
<td>1.75</td>
<td>0.50</td>
<td>2.06</td>
</tr>
<tr>
<td>2014</td>
<td>0.92</td>
<td>1.27</td>
<td>0.45</td>
<td>1.23</td>
<td>0.54</td>
<td>0.66</td>
<td>1.93</td>
<td>2.02</td>
<td>0.64</td>
<td>1.90</td>
</tr>
</tbody>
</table>

Source: National Health Workforce Data Set (NHWDS): Nurses and midwives 2013 and 2014

5.4 Aboriginal and Torres Strait Islander peoples in the allied health workforce

The registered allied health workforce makes up about 25% of the health workforce and is growing, with 108,367 registered allied health practitioners working in Australia in 2014, up from 100,881 in 2013; or a 7.4% increase.

There are 16 allied health professions registered through the NRAS, including: psychologists; pharmacists; physiotherapists; dentists; dental hygienists; dental prosthetists; dental therapists; oral health therapists; occupational therapists; medical radiation practitioners; chiropractors; optometrists; Chinese medicine practitioners; podiatrists; osteopaths and Aboriginal and Torres Strait Islander Health Practitioners.
The data does not currently include allied health disciplines that are self-regulated or unregulated, such as: audiology; dietetics/nutrition; exercise physiology/science; orthoptics; prosthetics and orthotics; social work; social welfare; speech pathology; public health; and Aboriginal and Torres Strait Islander mental health.

The dental workforce and the Aboriginal and Torres Strait Islander Health Practitioner workforces have been presented separately from the allied health workforce. (See 5.5 and 5.6 below)

Table 5.4(a): Aboriginal and Torres Strait Islander allied health professionals in the Australian workforce - 2013 to 2014

<table>
<thead>
<tr>
<th></th>
<th>National</th>
<th>NSW</th>
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<th>QLD</th>
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<th>TAS</th>
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<th>ACT</th>
<th>OT</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>407</td>
<td>161</td>
<td>56</td>
<td>102</td>
<td>40</td>
<td>14</td>
<td>15</td>
<td>16</td>
<td>&lt;5</td>
<td>0</td>
</tr>
<tr>
<td>2014</td>
<td>430</td>
<td>167</td>
<td>55</td>
<td>114</td>
<td>41</td>
<td>12</td>
<td>16</td>
<td>17</td>
<td>7</td>
<td>0</td>
</tr>
</tbody>
</table>

Source: National Health Workforce Data Set (NHWDS): Allied health 2013 and 2014

Table 5.4(b): Aboriginal and Torres Strait Islander allied health professionals in the Australian workforce as a proportion (%) of total allied health workforce - 2013 to 2014

<table>
<thead>
<tr>
<th></th>
<th>National</th>
<th>NSW</th>
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<th>QLD</th>
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<th>TAS</th>
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<th>OT</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>0.40</td>
<td>0.50</td>
<td>0.21</td>
<td>0.54</td>
<td>0.36</td>
<td>0.20</td>
<td>0.77</td>
<td>2.11</td>
<td>0.15</td>
<td>N/A</td>
</tr>
<tr>
<td>2014</td>
<td>0.40</td>
<td>0.49</td>
<td>0.19</td>
<td>0.56</td>
<td>0.35</td>
<td>0.16</td>
<td>0.75</td>
<td>2.07</td>
<td>0.33</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Source: National Health Workforce Data Set (NHWDS): Allied health 2013 and 2014

5.5 Aboriginal and Torres Strait Islander peoples in the dental workforce
The dental workforce includes: dentists; dental hygienists; dental prosthetists; dental therapists; and oral health therapists.

Table 5.5(a): Aboriginal and Torres Strait Islander dental workforce in Australia - 2013 to 2014

<table>
<thead>
<tr>
<th></th>
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<th>NSW</th>
<th>VIC</th>
<th>QLD</th>
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</thead>
<tbody>
<tr>
<td>2013</td>
<td>50</td>
<td>17</td>
<td>&lt;5</td>
<td>12</td>
<td>5</td>
<td>6</td>
<td>&lt;5</td>
<td>&lt;5</td>
<td>&lt;5</td>
<td>0</td>
</tr>
<tr>
<td>2014</td>
<td>58</td>
<td>19</td>
<td>6</td>
<td>16</td>
<td>7</td>
<td>8</td>
<td>&lt;5</td>
<td>0</td>
<td>&lt;5</td>
<td>0</td>
</tr>
</tbody>
</table>

Source: National Health Workforce Data Set (NHWDS): Dental workforce 2013 and 2014

Table 5.5(b): Aboriginal and Torres Strait Islander dental workforce in Australia as a proportion (%) of total dental workforce - 2013 to 2014

<table>
<thead>
<tr>
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<th>NSW</th>
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<th>QLD</th>
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<th>NT</th>
<th>ACT</th>
<th>OT</th>
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</thead>
<tbody>
<tr>
<td>2013</td>
<td>0.30</td>
<td>0.33</td>
<td>0.10</td>
<td>0.36</td>
<td>0.26</td>
<td>0.43</td>
<td>0.33</td>
<td>2.46</td>
<td>0.61</td>
<td>N/A</td>
</tr>
<tr>
<td>2014</td>
<td>0.33</td>
<td>0.35</td>
<td>0.15</td>
<td>0.45</td>
<td>0.34</td>
<td>0.55</td>
<td>0.32</td>
<td>0.00</td>
<td>0.30</td>
<td>N/A</td>
</tr>
</tbody>
</table>

Source: National Health Workforce Data Set (NHWDS): Dental workforce 2013 and 2014

5.6 Aboriginal and Torres Strait Islander Health Practitioners
Aboriginal and Torres Strait Islander Health Practitioners (ATSIHP) are the registered component of the Aboriginal and Torres Strait Islander Health Worker workforce.

To be eligible to register as an ATSIHP, a person must hold a Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care Practice, or equivalent.
as determined by the Aboriginal and Torres Strait Islander Health Practice Board of Australia.

Grand-parenting arrangements were in place until 30 June 2015 to allow practitioners to register based on work experience and other qualifications. From 1 July 2015, applicants are required to have completed an approved program of study. As at 30 April 2016, AHPRA had approved five programs of study.

**Table 5.6(a): Aboriginal and Torres Strait Islander Health Practitioners in the Australian workforce - 2013 and 2014**

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>2013</td>
<td>274</td>
<td>24</td>
<td>6</td>
<td>32</td>
<td>14</td>
<td>7</td>
<td>&lt;5</td>
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<tr>
<td>2014</td>
<td>266</td>
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<td>28</td>
<td>18</td>
<td>11</td>
<td>&lt;5</td>
<td>166</td>
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</tbody>
</table>

Source: National Health Workforce Data Set (NHWDS): Allied Health 2013, 2014

6.0 Students

Despite progress in recent decades, the access, participation, retention, completion and transition rates for Aboriginal and Torres Strait Islander students studying health in tertiary settings are significantly lower than those of non-Indigenous students. The authors of the Indigenous Higher Education Review 2012 noted that Aboriginal and Torres Strait Islander students experience a one in three dropout rate from university compared to one in five for all domestic students, and that overall completion rates were 22% less than for non-Indigenous students.

While the number of Indigenous students enrolling in tertiary health-related courses increased between 2001 and 2012, there was little improvement in the number of students who completed their studies, as illustrated below.

![Graph showing enrolments and completions](image)

Source: Department of Prime Minister and Cabinet, Aboriginal and Torres Strait Islander Health Performance Framework 2014, Table 3.20
6.1 Aboriginal and Torres Strait Islander Students - All health disciplines - Higher education commencements

Table 6.1(a): Aboriginal and Torres Strait Islander health student commencements (Broad field of education - health excluding veterinary studies) by state, territory and nationally - 2010 to 2014

<table>
<thead>
<tr>
<th></th>
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<tbody>
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<td>103</td>
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<td>165</td>
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<tr>
<td>2011</td>
<td>1924</td>
<td>24</td>
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<td>208</td>
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<td>138</td>
<td>47</td>
<td>215</td>
<td>261</td>
<td>64</td>
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<tr>
<td>2012</td>
<td>1838</td>
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<td>592</td>
<td>119</td>
<td>458</td>
<td>125</td>
<td>49</td>
<td>223</td>
<td>210</td>
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<td>2007</td>
<td>25</td>
<td>674</td>
<td>117</td>
<td>467</td>
<td>125</td>
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<td>234</td>
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<td>2014</td>
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<td>726</td>
<td>80</td>
<td>540</td>
<td>131</td>
<td>65</td>
<td>267</td>
<td>233</td>
<td>78</td>
</tr>
</tbody>
</table>

Source: Australian Government Department of Education; Higher Education Statistics 2015

Notes:
- MUL or 'Multi-state' captures data from universities that provide health education across multiple campuses.
- Health disciplines include all six-digit detailed Fields of Education which are classified under one of the following:
  - Broad field '06 Health'
  - Narrow field '0199 Other natural and physical sciences'
  - Detailed field '039903 Biomedical Engineering'
  - Detailed field '070117 Nursing Education Teacher Training'
  - Detailed field '080313 Public and Health Care Administration'
  - Detailed field '090311 Indigenous Studies'
  - Narrow field '0905 Human Welfare Studies and Services'
  - Narrow field '0907 Behavioural Science'

Table 6.1(b): Aboriginal and Torres Strait Islander health student commencements (Broad field of education - health excluding veterinary studies) as a proportion (%) of all domestic health student commencements by state, territory and nationally - 2010 to 2014

<table>
<thead>
<tr>
<th></th>
<th>National</th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>MUL</th>
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</thead>
<tbody>
<tr>
<td>2010</td>
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<td>1.10</td>
<td>2.16</td>
<td>10.60</td>
<td>2.08</td>
<td>1.24</td>
<td>1.57</td>
<td>0.84</td>
<td>2.88</td>
<td>1.38</td>
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<td>2011</td>
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<td>1.23</td>
<td>2.31</td>
<td>16.81</td>
<td>2.03</td>
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<td>1.04</td>
<td>2.75</td>
<td>1.59</td>
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<tr>
<td>2012</td>
<td>1.82</td>
<td>0.91</td>
<td>2.22</td>
<td>9.22</td>
<td>2.13</td>
<td>1.32</td>
<td>1.36</td>
<td>0.99</td>
<td>2.22</td>
<td>1.00</td>
</tr>
<tr>
<td>2013</td>
<td>1.85</td>
<td>1.11</td>
<td>2.48</td>
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<td>1.98</td>
<td>1.24</td>
<td>1.42</td>
<td>0.92</td>
<td>2.33</td>
<td>1.60</td>
</tr>
<tr>
<td>2014</td>
<td>1.87</td>
<td>1.22</td>
<td>2.49</td>
<td>5.83</td>
<td>2.26</td>
<td>1.29</td>
<td>1.35</td>
<td>0.99</td>
<td>2.26</td>
<td>1.36</td>
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</table>

Source: Australian Government Department of Education; Higher Education Statistics 2015

Notes:
- MUL or 'Multi-state' captures data from universities that provide health education across multiple campuses.
- Health disciplines include all six-digit detailed Fields of Education which are classified under one of the following:
  - Broad field '06 Health'
  - Narrow field '0199 Other natural and physical sciences'
  - Detailed field '039903 Biomedical Engineering'
  - Detailed field '070117 Nursing Education Teacher Training'
  - Detailed field '080313 Public and Health Care Administration'
  - Detailed field '090311 Indigenous Studies'
  - Narrow field '0905 Human Welfare Studies and Services'
  - Narrow field '0907 Behavioural Science'
6.2 Aboriginal and Torres Strait Islander Students - All health disciplines - Higher education completions

Table 6.2(a): Aboriginal and Torres Strait Islander health student completions (Broad field of education - health excluding veterinary studies) by state, territory and nationally - 2010 to 2014

<table>
<thead>
<tr>
<th></th>
<th>National</th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>MUL</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>485</td>
<td>5</td>
<td>149</td>
<td>26</td>
<td>112</td>
<td>43</td>
<td>13</td>
<td>56</td>
<td>68</td>
<td>13</td>
</tr>
<tr>
<td>2011</td>
<td>606</td>
<td>9</td>
<td>165</td>
<td>50</td>
<td>126</td>
<td>45</td>
<td>16</td>
<td>85</td>
<td>101</td>
<td>9</td>
</tr>
<tr>
<td>2012</td>
<td>614</td>
<td>7</td>
<td>199</td>
<td>77</td>
<td>141</td>
<td>42</td>
<td>13</td>
<td>75</td>
<td>48</td>
<td>12</td>
</tr>
<tr>
<td>2013</td>
<td>689</td>
<td>8</td>
<td>224</td>
<td>17</td>
<td>157</td>
<td>38</td>
<td>31</td>
<td>106</td>
<td>87</td>
<td>21</td>
</tr>
<tr>
<td>2014</td>
<td>731</td>
<td>14</td>
<td>265</td>
<td>25</td>
<td>187</td>
<td>53</td>
<td>17</td>
<td>101</td>
<td>53</td>
<td>16</td>
</tr>
</tbody>
</table>

Source: Australian Government Department of Education; Higher Education Statistics 2015

Notes:
- MUL or ‘Multi-state’ captures data from universities that provide health education across multiple campuses.
- Health disciplines include all six-digit detailed Fields of Education which are classified under one of the following:
  - Broad field ‘06 Health’
  - Narrow field ‘0199 Other natural and physical sciences’
  - Detailed field ‘039903 Biomedical Engineering’
  - Detailed field ‘070117 Nursing Education Teacher Training’
  - Detailed field ‘080313 Public and Health Care Administration’
  - Detailed field ‘090311 Indigenous Studies’
  - Narrow field ‘0905 Human Welfare Studies and Services’
  - Narrow field ‘0907 Behavioural Science’

Table 6.2(b): Aboriginal and Torres Strait Islander health student completions (Broad field of education - health excluding veterinary studies) as a proportion (%) of all domestic health student completions by state, territory and nationally - 2010 to 2014

<table>
<thead>
<tr>
<th></th>
<th>National</th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>MUL</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>1.01</td>
<td>0.43</td>
<td>1.24</td>
<td>6.72</td>
<td>1.15</td>
<td>0.83</td>
<td>0.88</td>
<td>0.47</td>
<td>1.43</td>
<td>0.91</td>
</tr>
<tr>
<td>2011</td>
<td>1.16</td>
<td>0.75</td>
<td>1.27</td>
<td>9.80</td>
<td>1.21</td>
<td>0.87</td>
<td>1.07</td>
<td>0.62</td>
<td>1.92</td>
<td>0.52</td>
</tr>
<tr>
<td>2012</td>
<td>1.12</td>
<td>0.55</td>
<td>1.41</td>
<td>13.95</td>
<td>1.27</td>
<td>0.77</td>
<td>0.82</td>
<td>0.54</td>
<td>0.93</td>
<td>0.71</td>
</tr>
<tr>
<td>2013</td>
<td>1.16</td>
<td>0.59</td>
<td>1.49</td>
<td>3.66</td>
<td>1.32</td>
<td>0.62</td>
<td>1.37</td>
<td>0.73</td>
<td>1.57</td>
<td>1.02</td>
</tr>
<tr>
<td>2014</td>
<td>1.19</td>
<td>1.14</td>
<td>1.70</td>
<td>4.79</td>
<td>1.51</td>
<td>0.84</td>
<td>0.87</td>
<td>0.66</td>
<td>0.89</td>
<td>0.67</td>
</tr>
</tbody>
</table>

Source: Australian Government Department of Education; Higher Education Statistics 2015

Notes:
- MUL or ‘Multi-state’ captures data from universities that provide health education across multiple campuses.
- Health disciplines include all six-digit detailed Fields of Education which are classified under one of the following:
  - Broad field ‘06 Health’
  - Narrow field ‘0199 Other natural and physical sciences’
  - Detailed field ‘039903 Biomedical Engineering’
  - Detailed field ‘070117 Nursing Education Teacher Training’
  - Detailed field ‘080313 Public and Health Care Administration’
  - Detailed field ‘090311 Indigenous Studies’
  - Narrow field ‘0905 Human Welfare Studies and Services’
  - Narrow field ‘0907 Behavioural Science’
6.3 Aboriginal and Torres Strait Islander students enrolled in health programs in the vocational education and training sector

Aboriginal and Torres Strait Islander students represent approximately 2.8% of all students enrolled in health programs in the vocational education and training sector.

Table 6.3(a): Number of Aboriginal and Torres Strait Islander students studying health in the VET sector and as a percentage of all Aboriginal and Torres Strait Islander students studying in the VET sector - 2012 to 2014

<table>
<thead>
<tr>
<th>Year</th>
<th>National</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>4,135 students = 4.1% of all Aboriginal and Torres Strait Islander students</td>
</tr>
<tr>
<td>2013</td>
<td>3,970 students = 4.2% of all Aboriginal and Torres Strait Islander students</td>
</tr>
<tr>
<td>2014</td>
<td>6,906 students = 4.3% of all Aboriginal and Torres Strait Islander students</td>
</tr>
</tbody>
</table>

Source: National Centre for Vocational Education Research - Total VET students and courses 2012-14

Notes:
- A list of health subjects taught in the vocational education and training sector is at Appendix C

The Workforce Data Analysis Section of the Department of Health is working with the Department of Education and Training to improve data from the vocational education and training sector.

6.4 Medical Students – Commencements

Training more Indigenous doctors is seen as crucial to improve Aboriginal and Torres Strait Islander peoples’ health, both because these doctors are considered more likely to practise in Indigenous communities, and are better able to provide culturally-appropriate care.

In 2005, Aboriginal and Torres Strait Islander medical students represented just 0.8% of first-year enrolments. By 2014 this number had increased to 1.6%.

In 2014, a record number of 39 Indigenous medical students completed their degrees, and three universities celebrated their first Aboriginal and Torres Strait Islander medical graduates.

Table 6.4(a): Aboriginal and Torres Strait Islander medical student commencement numbers nationally - 2010 to 2014

<table>
<thead>
<tr>
<th>Year</th>
<th>National</th>
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</thead>
<tbody>
<tr>
<td>2010</td>
<td>52</td>
</tr>
<tr>
<td>2011</td>
<td>72</td>
</tr>
<tr>
<td>2012</td>
<td>48</td>
</tr>
<tr>
<td>2013</td>
<td>60</td>
</tr>
<tr>
<td>2014</td>
<td>63</td>
</tr>
</tbody>
</table>

Source: Australian Government Department of Education; Higher Education Statistics 2015
6.5 Medical Students – Completions
While enrolment numbers of Aboriginal and Torres Strait Islander students into medical schools is improving, completion rates remain problematic, at approximately a 30% drop-out rate for Aboriginal and Torres Strait Islander medical students compared with approximately 3% for non-Indigenous medical students.

6.6 Nursing Students – Commencing
In recent years, the numbers of Indigenous students entering nursing courses has increased. However, the completion rates for Indigenous nursing students have not kept up with the increased enrolments; they have been consistently lower than non-Indigenous nursing students by about one third.
Notes:
- MUL or ‘Multi-state’ captures data from universities that provide health education across multiple campuses.

### Table 6.6(b): Aboriginal and Torres Strait Islander nursing student commencements as a proportion (%) of total domestic nursing student commencements by state, territory and nationally - 2010 to 2014

<table>
<thead>
<tr>
<th>Year</th>
<th>National</th>
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<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>MUL</th>
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</thead>
<tbody>
<tr>
<td>2010</td>
<td>2.20</td>
<td>1.54</td>
<td>2.59</td>
<td>5.90</td>
<td>2.93</td>
<td>1.80</td>
<td>2.04</td>
<td>1.20</td>
<td>0.96</td>
<td>1.84</td>
</tr>
<tr>
<td>2011</td>
<td>2.42</td>
<td>3.24</td>
<td>2.74</td>
<td>5.66</td>
<td>3.22</td>
<td>1.68</td>
<td>3.20</td>
<td>1.82</td>
<td>1.56</td>
<td>0.90</td>
</tr>
<tr>
<td>2012</td>
<td>2.33</td>
<td>0.56</td>
<td>2.74</td>
<td>6.84</td>
<td>3.28</td>
<td>1.73</td>
<td>1.80</td>
<td>1.51</td>
<td>1.21</td>
<td>0.53</td>
</tr>
<tr>
<td>2013</td>
<td>2.39</td>
<td>0.57</td>
<td>2.65</td>
<td>5.69</td>
<td>3.19</td>
<td>1.46</td>
<td>2.53</td>
<td>1.88</td>
<td>1.67</td>
<td>1.33</td>
</tr>
<tr>
<td>2014</td>
<td>2.43</td>
<td>2.19</td>
<td>3.20</td>
<td>5.25</td>
<td>3.02</td>
<td>1.57</td>
<td>2.26</td>
<td>1.45</td>
<td>1.76</td>
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</table>

Source: Australian Government Department of Education; Higher Education Statistics 2015

### 6.7 Nursing Students – Completions

### Table 6.7(a): Aboriginal and Torres Strait Islander nursing student completions by state, territory and nationally – 2010 to 2014

<table>
<thead>
<tr>
<th>Year</th>
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<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>MUL</th>
</tr>
</thead>
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<tr>
<td>2010</td>
<td>96</td>
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<td>27</td>
<td>10</td>
<td>30</td>
<td>8</td>
<td>&lt;5</td>
<td>13</td>
<td>&lt;5</td>
<td>&lt;5</td>
</tr>
<tr>
<td>2011</td>
<td>90</td>
<td>&lt;5</td>
<td>23</td>
<td>5</td>
<td>28</td>
<td>13</td>
<td>&lt;5</td>
<td>9</td>
<td>&lt;5</td>
<td>&lt;5</td>
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<tr>
<td>2012</td>
<td>102</td>
<td>&lt;5</td>
<td>27</td>
<td>5</td>
<td>33</td>
<td>11</td>
<td>5</td>
<td>13</td>
<td>&lt;5</td>
<td>&lt;5</td>
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<tr>
<td>2013</td>
<td>128</td>
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<td>&lt;5</td>
</tr>
<tr>
<td>2014</td>
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<td>&lt;5</td>
<td>49</td>
<td>8</td>
<td>43</td>
<td>7</td>
<td>&lt;5</td>
<td>20</td>
<td>6</td>
<td>8</td>
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</tbody>
</table>

Source: Australian Government Department of Education; Higher Education Statistics 2015

### Table 6.7(b): Aboriginal and Torres Strait Islander nursing student completions as a proportion (%) of total domestic nursing student completions by state, territory and nationally - 2010 to 2014

<table>
<thead>
<tr>
<th>Year</th>
<th>National</th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>MUL</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>1.29</td>
<td>0.00</td>
<td>1.48</td>
<td>4.83</td>
<td>2.01</td>
<td>1.12</td>
<td>0.57</td>
<td>0.82</td>
<td>0.55</td>
<td>0.43</td>
</tr>
<tr>
<td>2011</td>
<td>1.13</td>
<td>1.03</td>
<td>1.25</td>
<td>1.97</td>
<td>1.77</td>
<td>1.70</td>
<td>0.83</td>
<td>0.55</td>
<td>0.48</td>
<td>0.69</td>
</tr>
<tr>
<td>2012</td>
<td>1.20</td>
<td>1.04</td>
<td>1.31</td>
<td>2.34</td>
<td>1.75</td>
<td>1.25</td>
<td>2.55</td>
<td>0.80</td>
<td>0.44</td>
<td>0.46</td>
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<td>2013</td>
<td>1.41</td>
<td>0.93</td>
<td>1.73</td>
<td>1.98</td>
<td>2.01</td>
<td>0.69</td>
<td>3.44</td>
<td>1.10</td>
<td>0.59</td>
<td>0.55</td>
</tr>
<tr>
<td>2014</td>
<td>1.51</td>
<td>0.00</td>
<td>2.11</td>
<td>3.20</td>
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<td>0.78</td>
<td>1.17</td>
<td>1.22</td>
<td>0.52</td>
<td>1.00</td>
</tr>
</tbody>
</table>

Source: Australian Government Department of Education; Higher Education Statistics 2015

Notes:
- MUL or ‘Multi-state’ captures data from universities that provide health education across multiple campuses.
7.0 Aboriginal and Torres Strait Islander peoples working in each jurisdiction

The following two tables reflect the proportion of Aboriginal and Torres Strait Islander peoples working in health in each jurisdiction.

**Table 7(a): Proportion (%) of people who identify as Aboriginal and Torres Strait Islander working in Cth/state/territory health departments and in the ACCHS – 2013, 2014 and 2015**

<table>
<thead>
<tr>
<th></th>
<th>Cth</th>
<th>NSW</th>
<th>VIC</th>
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<th>NT</th>
<th>ACT</th>
<th>ACCHS</th>
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<tbody>
<tr>
<td>2013</td>
<td>1.9</td>
<td>1.9</td>
<td>1.3</td>
<td>2.4</td>
<td>1.1</td>
<td>1.0</td>
<td>na</td>
<td>6.9</td>
<td>0.9</td>
<td>60</td>
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<tr>
<td>2014</td>
<td>1.9</td>
<td>2.1</td>
<td>2.1</td>
<td>2.1</td>
<td>1.6</td>
<td>0.96</td>
<td>na</td>
<td>9.2</td>
<td>1.1</td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td>2.1</td>
<td>2.4</td>
<td>1.6</td>
<td>1.68</td>
<td>1.0</td>
<td>0.94</td>
<td>na</td>
<td>9.2</td>
<td>1.1</td>
<td>57</td>
</tr>
</tbody>
</table>

Source: Health department administrative data 2013, 2014 and 2015 (NOTE: these figures represent a point in time for each jurisdiction)

ACCHS source: Report – Economic Value of Aboriginal Community Controlled Health Services, Dr Katrina Alford, 2 April 2014

Notes:
- 'na' denotes currently ‘not available’

8.0 Cultural safety training

The development and delivery of well-designed and implemented cultural safety training programs can assist in the aim of achieving a health system that is a safe environment for Aboriginal and Torres Strait Islander peoples and where cultural differences are respected.

Approximately 89.5% of organisations provide cultural orientation for non-Aboriginal and Torres Strait Islander staff, with approximately 60% of organisations including cultural competence as part of staff performance appraisal processes. The following table represents the numbers of health department staff in each jurisdiction who have received cultural safety training.

Further information regarding cultural safety training programs and participation rates is included in the jurisdictional updates provided in Appendix A.
Appendix A - Additional information

**Indigenous Allied Health Australia**

Under the NRAS, unregulated professions require a degree qualification and provide the “necessary knowledge, attributes, attitudes and skills required to be an autonomous practitioner and practice in evidence-based paradigm. Using a recognised body of skills and knowledge contributes to the physical, sensory, psychological, cognitive, social, emotional and cultural wellbeing of people so that each individual is able to achieve their full potential as a human being” and therefore meet the criteria to be considered allied health disciplines.

Allied health professionals are an essential element in a responsive and equitable health system that is able to accommodate the widely varying needs of Aboriginal and Torres Strait Islander people, many with chronic and complex conditions. As one of the largest and most diverse professional health workforce cohorts, allied health professionals are well placed to ensure people receive treatment in the most appropriate place, avoid unnecessary hospitalisations and stay well for longer.

Allied health professionals work in widely diverse settings, including but not limited to clinics, hospitals, rehabilitation centres, laboratories, schools, long-term care facilities, Aboriginal Medical/Health Services, community health centres, and home healthcare agencies. The increase in the number of people living with complex and chronic conditions across both Aboriginal and Torres Strait Islander populations and the wider community has resulted in a greater need for interdisciplinary approaches including a diverse range of allied health professionals working across multiple settings.

Increasing the number of Aboriginal and Torres Strait Islander peoples in the allied health workforce is a strategy that can contribute to achieving health equality for Aboriginal and Torres Strait Islander peoples.

**Australian Indigenous Doctors’ Association**

There are currently 204 AIDA doctors, with a further 2,711 required to meet 3% parity of the medical workforce of 97,168 (based on the Medical Board of Australia registrations). AIDA doctors currently comprise 0.21% of the medical workforce.

**Department of Health, Western Australia**

Aligning to the *WA Aboriginal Health and Wellbeing Framework 2015-2030* strategic direction for a culturally respectful and non-discriminatory health system, WA Health developed an Aboriginal Cultural eLearning package which is mandatory for all WA Health staff.

The Aboriginal Cultural eLearning package incorporates Aboriginal Cultural Learning, the development of Cultural Learning Plans and access to the Aboriginal Impact Statement and Declaration.

WA Health is finalising a review of the *WA Health Aboriginal Leadership Strategy 2013-2016* and associated training requirements.
Department of Health and Human Services, Tasmania
The Tasmanian Clinical Education Network (TCEN) funded the Tasmanian Aboriginal Council (TAC) to develop virtual orientation tours of the three Aboriginal Health Services in Tasmania (Hobart, Launceston and Burnie). These are hosted on the Tasmanian Clinical Education Network and TAC website. This project addresses the identified need for exposure to attract more health professional students to study Aboriginal Health issues and Aboriginal Health Services.

In addition, the TCEN has provided clinical supervision support training and simulated learning environment opportunities for health professional staff and students across the public, private and not-for-profit sectors. These workshops were delivered around Tasmania, including communities where there is a significant Aboriginal and Torres Strait Islander population, such as King Island and Flinders Island. Topics included supporting students in the workplace, medical emergency training, advanced life support scenarios, neo-natal and pediatric care.

In the public Tasmanian Health System consideration of cultural issues is embedded in service delivery. Aboriginal cultural competency training is offered by both e-learning and face-to-face modes (when available).

Department for Health and Ageing, South Australia
Leadership
The Aboriginal Learning Set Project was a collaborative project with Flinders University Department of Health Care Management. The project responded to an identified gap in support and development opportunities for Aboriginal staff working in policy or management roles. Five Aboriginal participants have completed the program.

The project also reported on the experiences and challenges of the participants to assist SA Health improve the recruitment and retention of Aboriginal staff in senior roles. A report “Learning from Working Life” was produced and provided key finding and a set of recommendations in the areas of:
1.  Effective supervision and coaching
2.  Respect and engagement
3.  Tailored staff development
4.  Job and project design
5.  Dealing with grief and loss

Cultural safety
A wide range of Cultural Awareness Programs and Aboriginal Cultural Respect Training are held across hospitals and health services within SA Health. These include programs provided as part of induction process for new staff, as well as programs for existing staff. One example is a Cultural Safety Workshop co-hosted by the South Australian Medical Education Training Unit and Flinders University Poche Centre. The program was open to all health workers but was specially designed for junior doctors.

An Aboriginal Cultural Competence Framework is being developed to outline the competencies required to ensure that the SA Health workforce is able to provide a
safe and meaningful environment for Aboriginal people in which cultural differences are acknowledged and respected.

The Commissioner for Public Sector Employment has sponsored a Public Sector Aboriginal Employment Career Pathways 90 Day Project. As part of this 90 Day Project, the Department of State Development hosted an Aboriginal Employees Forum in Adelaide on 3 June 2015 to generate ideas to increase Aboriginal Employment in the public sector. In 2015-16 this initiative will be progressed by developing a Work Health and Safety (WHS) Framework for Cultural Safety. The project will focus on cultural safety as part of a WHS framework to provide an environment where every public sector worker or person who engages with the public sector feels safe to express their own cultural identity.

Workforce Highlights
As of June 2015, SA had a total of 13 Aboriginal Health Practitioners registered with the Aboriginal and Torres Strait Islander Health Practice Board of Australia. Of these 13 registrants, eight (62%) were men and five (38%) were women.

The SA Health Aboriginal Health Practitioners project currently in progress aims to increase the number of Aboriginal Health Practitioners employed across SA Health services. The project continues to progress the development of a structure that will assist with strengthening utilization of Aboriginal Health Practitioners in the SA Health workforce.

The Aboriginal Maternal Infant Care (AMIC) initiative within SA Health continued to operate within a strong framework where AMIC workers, in partnership with a midwife, provided culturally safe continuity of care to Aboriginal women through antenatal, birthing and postnatal period.

In 2015, the SA Health Aboriginal Health Scholarship Program supported 50 students. Three students graduated during the year in the fields of:

- Bachelor of Medicine/ Bachelor of Surgery.
- Bachelor of Social Work with Honors.
- Bachelor of Dental Surgery.

In July 2015, 21 new scholarships in a range of programs including health science, medicine, nursing, midwifery, paramedicine, physiotherapy, occupational therapy and psychology were awarded. Of these:

- 10 scholarships were co-sponsored with Australian Rotary Health and Aboriginal Health Branch Investment Funds.
- 11 were solely sponsored through the Aboriginal Health Branch Investment Funds.

The Aboriginal Nursing and Midwifery Cadetship Program (coordinated by Lyell McEwin Hospital) had nine cadets in the program (two Midwifery, two Registered Nursing, five Enrolled Nursing). Three cadets are on track to graduate by the end of the year taking the total number of graduates of the program to 27 since its inception in 2010.
Department of Health, Northern Territory
The following information reflects the work undertaken by the NT Department of Health to increase its Aboriginal health workforce and is not directly associated with work by ATSIHWWG.

Staff numbers
The Northern Territory Government announced in February 2015 that one of the Governments priorities is a new public sector Aboriginal employment target to increase the proportion of Aboriginal employees from 8% to 16% by 2020.

The new Aboriginal employment target supports the intent of the Special Measures in Recruitment. NT Health is committed to improving recruitment, retention and career development opportunities for Aboriginal people. A Special Measures Plan was implemented to enable preference in recruitment to be given to Aboriginal applicants for advertised vacancies across NT Health – the Department of Health, Central Australia Health Service and Top End Health Service.

The Special Measures Plan will apply to NT Health’s recruitment processes for two years (2015 – 2016) starting in January 2015 with ongoing review of its effectiveness throughout this period.

The overall percentage of total staff declaring as being Aboriginal and/or Torres Strait Islander people increased from 8.2% in 2013-14 to 9.2% in 2014-15 (Department of Health Annual Report 2014-15, Northern Territory Government 2015).

Back on Track
Implemented in July 2014, the Back on Track project aims to increase the number of Aboriginal and Torres Strait Islander Health Practitioners (ATSIHP) by a further 10% per year. The scope has been extended to include all Aboriginal workforce. To build the capacity of the Aboriginal workforce Back on Track focuses on key areas such as entry pathways, training and education, recruitment and career structures so that participants complete the program with qualifications that can lead to jobs back in their local communities.

Cultural awareness
The Department of Health offers three training programs for cultural awareness:

- Aboriginal Cultural Awareness Program (ACAP)
- Cultural Capability Development for Managers
- Cultural Considerations for Policy and Strategic Program Developers

The Department of Health Annual Report 2014-15, Northern Territory Government reports that during 2014-15, 913 staff attended the Department’s Aboriginal Cultural Awareness Program (ACAP) to develop their skills, knowledge and attitudes in working effectively with Aboriginal staff and clients to improve health outcomes and the consumer experience.

Overall, a total of 37.94% of current employees have undertaken ACAP compared to 30.8% in 2013-2014 (Department of Health Annual Report 2014-15, Northern Territory Government 2015).
<table>
<thead>
<tr>
<th>Agency Name</th>
<th>Total number of employees who have attended ACAP training</th>
<th>Paid FTE 2014/15</th>
<th>% of Total Workforce Completed ACAP Training</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department of Health</td>
<td>526</td>
<td>1183.95</td>
<td>44.43%</td>
</tr>
<tr>
<td>Top End Health Service</td>
<td>1087</td>
<td>3513.52</td>
<td>30.94%</td>
</tr>
<tr>
<td>Central Australia Health Service</td>
<td>786</td>
<td>1625.99</td>
<td>48.34%</td>
</tr>
<tr>
<td>Grand Total</td>
<td>2399</td>
<td>6323.46</td>
<td>37.94%</td>
</tr>
</tbody>
</table>


The Department implemented a further two cultural capacity development programs to build a skilled and culturally responsive workforce.

67 staff attended the Cultural Capability Development for Managers which provides Managers, particularly those with Aboriginal staff, with an understanding of the need for a range of working styles that are reflective of a diverse workforce, where diversity is valued and encouraged.

46 staff attended the Cultural Considerations for Policy and Strategic Program Developers which provides a foundation to understand the importance of incorporating and considering cross cultural elements in the design and delivery of NT Health initiatives and projects.

Leadership

The Department offers two tailored leadership and management development programs:

- Building our Leaders - First Line Managers (aligned to Certificate IV in Frontline Management)
  - Two Aboriginal and Torres Strait Islander staff completed (Feb 2012-Feb 2013)
  - Four Aboriginal and Torres Strait Islander staff completed (Jan-Dec 2014)
  - Five Aboriginal and Torres Strait Islander staff completed (Jan-Dec 2015)

- Leading the Way - Middle Managers (aligned to Diploma of Management)
  - One Aboriginal and Torres Strait Islander staff completed (Feb 2012-Feb 2013)
  - Three Aboriginal and Torres Strait Islander staff completed (Jan – Dec 2014)
  - One Aboriginal and Torres Strait Islander staff completed (Jan-Dec 2015)

The following leadership and development courses are offered by the Office of the Commissioner for Public Employment which the Department encourages participation. The following courses have Aboriginal and Torres Strait Islander participation from the Department of Health:
### Program Year | Course Description
--- | ---
2015 | Future Leader Network
2015 | Future Leaders Program
2015 | Lookrukin Indigenous Women’s Leadership Development Program
2015 | Public Sector Management Program
2014 | Discovery Women as Leaders
2014 | 360 Feedback
2014 | Executive Leaders Program
2014 | ANZSOG - Executive Masters in Public Administration

**Department of Health and Human Services, Victoria**

In late 2014, the Victorian Government announced changes to the Victorian public service, including the creation of a new Department of Health and Human Services (the department). On 1 January 2015, the Department of Health, the Department of Human Services, and Sport and Recreation Victoria came together to form a new entity, the Department of Health and Human Services.

By integrating health, human services and sport and recreation, and by aligning policy making and service delivery, the department will continue to work with our partners to develop new ways to improve the health and wellbeing of Victorians.

Cultural Education as at 30 June 2014:

- **Hume region** - The former Department of Health Hume Region has appointed an Aboriginal Health Cultural Competence Quality Team Leader to oversee the implementation of the Hume Region Aboriginal Health Cultural Competence Action Plan.
- **Western Health** has developed an Aboriginal recruitment video.
- **Monash Health and Alfred Health** has developed the Implementation of Cultural Safety Training within a health service framework.

**The Maternity Services Education Program** - Delivered under the governance of The Royal Women’s Hospital, and works in partnership with the Victorian Aboriginal Community Controlled Health Organisation to deliver pregnancy care education for Koori Maternity Services (KMS), Aboriginal Health Workers and midwives, as well as cultural safety in maternity care workshops for a range of clinicians and allied health staff involved in maternity care for Aboriginal and Torres Strait Islander families.

**Koorie Maternity Services (KMS) Pregnancy care workshops**: Training strengthens the ability of KMS teams to provide pregnancy care for Aboriginal families in a culturally safe environment and to continue to improve birthing outcomes experienced by Aboriginal families in Victoria. The interactive style and content for the KMS pregnancy care workshops encourage and welcome the contribution, knowledge and expertise of each participant. During 2013-14, two KMS pregnancy care workshops were held with a total of 44 participants attending.

**Cultural safety workshops**: Cultural safety in maternity care workshops are facilitated on site for a range of clinicians and allied health staff involved in maternity care for Aboriginal and Torres Strait Islander families. Workshops aim to foster systemic change to improve culturally safe care and strengthen working relationships between...
Aboriginal and mainstream health organisations. During 2013-14, two cultural safety workshops were held with a total of 58 participants attending.

The Department of Health and Human Services has developed a Cultural Resources Guide that provides a summary of cultural resources including online and face to face.

**Cultural Education as at 30 June 2015**

- **Implementation of the Aboriginal Employment Plans (AEPs) program**
  
  This project is currently supporting 32 public health services with 500 staff or more to implement their AEPs over 2013-14 and 2014-15. Health services are implementing systemic policy and systems changes including cultural training and on-board processes to increase Aboriginal employment. The Victorian Public Sector Commission June 2014 workforce data for employment in Victorian public health services indicates Aboriginal employment has increased from 74 Aboriginal employees in 2011 to 168 in 2014.

- A total of 25 staff from Victorian Public Health Services have successfully completed a culturally-delivered Certificate IV in Training and Assessment qualification during 2014-15. This will provide skills for managers and supervisors to better support training and development of Aboriginal staff within their organisation.

- **The St Vincent’s Nexus Naanggabun Yarning; Aboriginal Peer Reflection Project** set out to develop culturally appropriate supervision training for Aboriginal workers using a peer based framework and to develop a framework for culturally appropriate supervision training for non-Aboriginal supervisors in the health sector.

  During 2014 and 2015, a total of 102 participants completed peer group reflection or cultural framework training, of these there were a total of 49 Aboriginal participants. The training built on their knowledge, skills and confidence to provide culturally relevant peer reflection and clinical or practice supervision.

- **DHHS contracted the Victorian Aboriginal Community Controlled Health Organisation to deliver the Introduction to Aboriginal Health cultural safety training to 22 Alcohol and Drug Executive Managers and 152 Alcohol and Drug Workers in 2015.**

- **The Inner North West Primary Care Project**
  
  This project has developed a number of resources promoting cultural competence and Aboriginal employment within the health sector. Including the following:
  
  - Asking the question training package including DVD and guide
  - Helping your organisation to create a welcoming environment for Aboriginal and Torres Strait Islander people
Barwon Health has launched the Aboriginal Cultural Awareness E-Learning tool for all staff and the Aboriginal cultural awareness for managers, supervisors and mentors E-Learning tool.

Eastern Health has developed an Aboriginal cultural training package which is available to their staff and embedded in the online induction package.

DHHS has developed a Mentoring Resources Guide which details a range of mentoring resources available to support Aboriginal staff in the health sector.

**Leadership**

In June 2015, DHHS launched its new ‘Moondani – Aboriginal Inclusion Action Plan 2015-18’. It lays a foundation for the department’s approach to policy and practice to ensure that it’s inclusive and accessible by Aboriginal clients.

DHHS funded over 20 Aboriginal employees to attend the Institute of Public Administration Australia (IPAA) Professional Indigenous Network Conference in April 2015. The conference explored leadership, career transition and the big challenges in public administration.

To build leadership capacity, the DHHS provided four fully funded places for Aboriginal employees on the 2014-15 intake of the La Trobe/IPAA Graduate Certificate of Public Sector Management.

The DHHS INTRAIN (Indigenous Training and Recruitment Initiatives Program) was introduced to improve the diversity and responsiveness of the Victorian Public Sector to Indigenous issues by increasing employment opportunities for Victorian Indigenous people. Scholarships are available to students undertaking a public health postgraduate degree. During 2014 and 2015 a total of 17 Aboriginal and Torres Strait Islander people have been supported with a scholarship from the INTRAIN program to undertake a Masters in Public Health.

Melbourne Health has developed the 'Together We Care' an in-house video of two Melbourne Health Aboriginal Employees talking about being Aboriginal people, their values, their expectations of their employer and managers, and what the 'Melbourne Health Aboriginal Employment Plan' means to them. The DVD won an award for Leadership in Public Sector Awards 2015 through the IPAA, Victoria.

**ACT Health, Australian Capital Territory**

**Cultural Awareness**

The 2015 – 2018 Reconciliation Action Plan cites that all permanent staff are to complete Aboriginal and Torres Strait Islander cultural awareness training within 12 months of commencement. It also stipulates that the department will develop and offer a refresher training course and require all staff to complete their Aboriginal and Torres Strait Islander cultural awareness training every 3 years.
ACT Health will also expand the Aboriginal and Torres Strait Islander cultural awareness training to include a face-to-face cultural immersion workshop for executives and staff who have completed the basic cultural awareness training.

Additionally, further targeted training will be offered to increase the cultural competence of clinical supervisors including:

- Providing specific programs for Aboriginal and Torres Strait Islander peoples and employees that support development, education and training opportunities in the health care sector.

- Ensuring positions are available on Management Development Programs and developing support mechanisms including mentors for Aboriginal and Torres Strait Islander staff.

**Leadership Information**

ACT Health launched the 2015 - 2018 Reconciliation Action Plan (RAP) in August 2015. The RAP document outlines a number of strategies for increasing Aboriginal and Torres Strait Islander recruitment and retention, and specific measures pertaining to building cultural capability across the jurisdiction over the 3 year period including:

- ACT Health will increase the recruitment of Aboriginal and Torres Strait Islander peoples to ACT Health and explore pathways to attract new skilled employees. ACT Health will adopt an annual growth rate target of 10% for Aboriginal and Torres Strait Islander employment. ACT Health has made a commitment to increasing Aboriginal and Torres Strait Islander employment to a minimum of 108 employees by June 2018.

- ACT Health will increase retention strategies for Aboriginal and Torres Strait Islander employees and develop career pathways for ACT Health Aboriginal and Torres Strait Islander employees; include the delivery of a mentoring program for Aboriginal and Torres Strait Islander recruits.

The ACT Health Aboriginal and Torres Strait Islander Health Workforce Action Plan is linked to ACT Health’s Workforce Plan 2013-2018 through specific actions under the focus areas of health workforce development, leadership, planning and policy.

The actions related to Health Workforce Leadership include:

- Provide a work environment that is culturally competent and skilled in Aboriginal and Torres Strait Islander histories, cultures and health and healthcare needs.

- Include in the Electronic Learning and Achievement Planning (ELAP) for the Director-General, Deputy Director-General and senior managers, commitment to provide leadership in Aboriginal and Torres Strait Islander health and to undertake cultural awareness training.

Work is currently underway to enable identification and reporting on Aboriginal and Torres Strait Islander staff participation in leadership and development activities.
**Affirmative Action**

In the 2014-15 financial year (to date) the ACT Health Employment Inclusion Manager has worked with services to establish and fill placements for four Aboriginal and/or Torres Strait Islander people; two Aboriginal and or Torres Strait islander people with Disability; and three Australian School Based Apprentices (ASBA) for Aboriginal or Torres Strait islander students.

The Integrated Clinical Training network continues to liaise with Aboriginal Medical Services in the placement of clinical students and to promote network membership and collaboration.

A special measures strategy has been implemented in ACT Health since October 2014 to enable the department to flag positions as identified positions where necessary. As a result six Aboriginal and Torres Strait Islander Liaison Officer roles have been reclassified as being identified positions only open to Aboriginal and Torres Strait Islander people. Aboriginal and Torres Strait Islander positions in the new Secure Mental Health Unit are also being investigated as identified positions.

**NSW Health, New South Wales**

The NSW Health’s *Good Health – Great Jobs Aboriginal Workforce Strategic Framework 2011 – 2015* requires all health services to report progress towards the 2.6% goal on a six-monthly basis. This reporting includes cultural training for all NSW Health staff through *Respecting the Difference: Aboriginal Cultural Training*. The eLearning component of *Respecting the Difference* training has now been completed by a majority of NSW Health staff (68.2%), though face-to-face completions are still below expectations.

**Good Health – Great Jobs ‘Stepping Up’ Aboriginal Recruitment and Retention Resource**

NSW Health launched *Stepping Up* – a multimedia Aboriginal recruitment resource to support the employment of Aboriginal people into NSW Health. It provides culturally sensitive and effective recruitment practices for Aboriginal people and aims to address the recruitment challenges experienced by NSW Health Managers and Aboriginal staff and job applicants.

**Good Health – Great Jobs ‘Stepping Up’ Forum 2015**

The inaugural ‘Good Health – Great Jobs’ *Stepping Up* Forum 2015 was hosted by the NSW Ministry of Health’s Aboriginal Workforce Unit at the Australian Technology Park (ATP), 2 Locomotive St, Eveleigh, NSW, on Tuesday 31 March and Wednesday 1 April 2015 and was deemed a great success. The Secretary launched the ‘Stepping Up’ Aboriginal Recruitment Resource, Link: [http://www.steppingup.health.nsw.gov.au/](http://www.steppingup.health.nsw.gov.au/) to guide Managers and Aboriginal applicants through the hiring process.

The purpose of the Forum was to reaffirm NSW Health’s commitment to ‘Closing the Gap’ in health outcomes for Aboriginal people and bring together Aboriginal and non-Aboriginal health managers and staff working in clinical, non-clinical and leadership roles to talk about how we can grow and continue to support our Aboriginal health workforce.
The forum attracted approximately 300 Aboriginal and non-Aboriginal participants from across NSW Health services over the two days who actively participated in workshop sessions and panels.

**Department of Health, Queensland**

**Aboriginal and Torres Strait Islander Workforce**

The Department of Health works in partnership with Hospital and Health Services as statutory bodies to plan, develop, design and deliver Aboriginal and Torres Strait Islander workforces.

The Department of Health is also developing an Aboriginal and Torres Strait Islander Workforce Strategic Framework to assist future planning for Aboriginal and Torres Strait Islander workforces under a State-wide Health Workforce Strategy currently under development.

The Aboriginal and Torres Strait Islander workforce performance agenda will be aligned to:

- Aboriginal and Torres Strait Islander Health Workforce National Strategic Framework (ATSIHWNSF)
- Queensland Aboriginal and Torres Strait Islander Health Plan – Making Tracks
- State-wide Health Workforce Strategy (Queensland)
- Cultural Capability Action Plan (Queensland)
- Diversity and Inclusion Plan (Queensland)
- Queensland whole of government commitment for Aboriginal and Torres Strait Islander workforce representation is currently set at 2.6%. The performance target is under review, noting Queensland’s overall Aboriginal and Torres Strait Islander population profile has increased to 3.6% since 2009.

**Aboriginal and Torres Strait Islander Health Worker Career Structure (ATSIHWCS)**

The Department of Health is preparing to engage the government health network to undertake a review of the career structure in line with the new enterprise agreement negotiations in 2016 with an emphasis on future changes affecting this workforce. Key to this review is the preparatory work underway with the engagement of Hospital and Health Services to introduce Aboriginal and Torres Strait Islander Health Practitioner roles.

Undertake broader workforce consultation as the current structure only identifies Aboriginal and Torres Strait Islander Health Worker positions along with the recognition of Aboriginal and Torres Strait Islander Primary Health Care Community Care stream qualifications as the mandatory requirements for all positions across Queensland Health.

The Department of Health had undertaken an initial review across Queensland Health and developed a discussion paper for the Aboriginal and Torres Strait Islander Health Worker and the Aboriginal and Torres Strait Islander Health Practitioner; examining the scopes of practice, governance and service delivery frameworks and the possible impacts on other workforces.

**Aboriginal and Torres Strait Islander Health Practitioner Registration enrolment**
The Department of Health is continuing to engage the Hospital and Health Services to establish intent for the Aboriginal and Torres Strait Islander Health Practitioner positions.

An engagement strategy was developed to promote the Aboriginal and Torres Strait Islander Health Practitioner workforce, highlighting key information such as: registration timelines; standards; accreditation and qualifications; scope relationships etc. to inform prospective registrants and affected workforces.

Positioning of Aboriginal and Torres Strait Islander Health Practitioners under the Drugs and Poisons Authority is under consultation.

**Department of Health, Australian Government**

**Puggy Hunter Memorial Scholarship Scheme (PHMSS)**

The PHMSS supports Aboriginal and Torres Strait Islander people who are undertaking study in a health-related discipline at an undergraduate or TAFE (Certificate IV and above) level. Scholarships are provided for full-time ($15,000/year) and part-time studies ($7,500/year).

As at 7 September 2015, there were 328 (290 full-time and 38 part-time) scholarship recipients receiving scholarship payments. Of these, 244 are female and 84 are male. Below is a summary of the continuing scholarship recipients.

<table>
<thead>
<tr>
<th>Discipline</th>
<th>ACT</th>
<th>NSW</th>
<th>NT</th>
<th>QLD</th>
<th>SA</th>
<th>TAS</th>
<th>VIC</th>
<th>WA</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allied health</td>
<td>1</td>
<td>16</td>
<td>1</td>
<td>27</td>
<td>8</td>
<td>3</td>
<td>6</td>
<td>3</td>
<td>65</td>
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<tr>
<td>Aboriginal and Torres Strait Islander health work</td>
<td>-</td>
<td>1</td>
<td>1</td>
<td>8</td>
<td>-</td>
<td>-</td>
<td>1</td>
<td>1</td>
<td>12</td>
</tr>
<tr>
<td>Dentistry/oral health</td>
<td>-</td>
<td>3</td>
<td>-</td>
<td>10</td>
<td>2</td>
<td>-</td>
<td>-</td>
<td>1</td>
<td>16</td>
</tr>
<tr>
<td>Direct entry midwifery</td>
<td>1</td>
<td>3</td>
<td>-</td>
<td>4</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>3</td>
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<td>-</td>
<td>1</td>
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<td>-</td>
<td>1</td>
<td>1</td>
<td>6</td>
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<td>8</td>
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<td>3</td>
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<td>Mental health</td>
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<td>1</td>
<td>7</td>
<td>9</td>
<td>88</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>4</strong></td>
<td><strong>111</strong></td>
<td><strong>10</strong></td>
<td><strong>117</strong></td>
<td><strong>27</strong></td>
<td><strong>7</strong></td>
<td><strong>19</strong></td>
<td><strong>33</strong></td>
<td><strong>328</strong></td>
</tr>
</tbody>
</table>

**2016 round**

For 2016 a total of 133 new scholarships places were offered, with 29 applicants placed on the reserve list. Unsuccessful letters were sent to 304 scholarship applicants (including 13 ineligible applicants). The breakdown by discipline of the number of recipients offered a scholarship place in 2016 is in the following table:
Distribution of places by discipline for the 2016 round

<table>
<thead>
<tr>
<th>Discipline</th>
<th>Successful</th>
<th>Reserve</th>
<th>Unsuccessful</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aboriginal and Torres Strait Islander health work</td>
<td>13</td>
<td>3</td>
<td>19</td>
<td>35</td>
</tr>
<tr>
<td>Allied Health</td>
<td>21</td>
<td>5</td>
<td>48</td>
<td>74</td>
</tr>
<tr>
<td>Dentistry/oral health</td>
<td>3</td>
<td>1</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>Direct entry midwifery</td>
<td>6</td>
<td>2</td>
<td>11</td>
<td>19</td>
</tr>
<tr>
<td>Enrolled nursing</td>
<td>11</td>
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<td>Health promotion</td>
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<td>Medicine</td>
<td>15</td>
<td>3</td>
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<td>53</td>
</tr>
<tr>
<td>Mental health</td>
<td>18</td>
<td>4</td>
<td>41</td>
<td>63</td>
</tr>
<tr>
<td>Registered nursing</td>
<td>42</td>
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<td>147</td>
</tr>
<tr>
<td>Total</td>
<td>133</td>
<td>29</td>
<td>291</td>
<td>453</td>
</tr>
</tbody>
</table>

Aboriginal and Torres Strait Islander Health Curriculum Framework

The Aboriginal and Torres Strait Islander Health Curriculum Framework (the Framework) has been developed to address the variability amongst all health professions and higher education providers in terms of the nature and extent to which Aboriginal and Torres Strait Islander curriculum is being implemented.

The aim of the Framework is to provide a model for higher education providers to successfully implement Aboriginal and Torres Strait Islander curricula, with clear learning outcomes and associated capabilities that could be applied widely across tertiary learning contexts.

The Framework was published on the Department of Health website on 26 February 2016.

GP registrar training in Aboriginal and Torres Strait Islander health

The Australian General Practice Training (AGPT) program provides vocational training for medical graduates wanting to specialise in general practice. The two endpoints of the AGPT program are Fellowship of the Royal Australian College of General Practitioners (RACGP) or the Australian College of Rural and Remote Medicine (ACRRM).

The AGPT program trains junior doctors towards obtaining vocational recognition as a specialist GP in Australia. Applicants who self-identify as being of Aboriginal or Torres Strait Islander origin may opt to receive priority shortlisting during the selection process, although this does not guarantee an offer of training. The number of applicants accepted on to the AGPT program who had identified as being of Aboriginal or Torres Strait Islander origin is shown in the table below:
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Aboriginal and Torres Strait Islander applicants accepted on to AGPT</td>
<td>9</td>
<td>9</td>
<td>7</td>
<td>3</td>
<td>6</td>
<td>21*</td>
</tr>
<tr>
<td>% of total acceptances</td>
<td>1.0%</td>
<td>0.9%</td>
<td>0.6%</td>
<td>0.2%</td>
<td>0.4%</td>
<td>1.5%*</td>
</tr>
</tbody>
</table>

*Denotes minimum figure, as round 2 is currently being undertaken.

The AGPT program delivers training according to the RACGP and ACRRM curriculum statements on Aboriginal and Torres Strait Islander health. The curriculum statements define the abilities, skills and knowledge that general practitioners require to deliver quality patient care in Aboriginal and Torres Strait Islander health.

This program aims to increase the quality of general practice training in Aboriginal and Torres Strait Islander health through well supported Aboriginal and Torres Strait Islander health training facilities.

Registrars can choose to undertake part of their training in an Aboriginal and Torres Strait Islander health training facility (a majority of which are Aboriginal Community Controlled Health Services (ACCHSs)). Facilities are located in urban, rural and remote areas in every state and territory across Australia.

The Department recognises ACCHSs as the primary training partner in the delivery of culturally-safe GP training. The Department will continue to support the new regional training providers (commencing operations January 2016), to deliver registrar training in Aboriginal and Torres Strait Islander health.

There are two key elements to AGPT Aboriginal and Torres Strait Islander health training:

1. **Strategic Plan Program**
   Strategic plans were funded for, and implemented by all 17 Regional Training Providers (RTPs) throughout 2013-2015.

   The primary objective was to identify and address barriers to the regional delivery of Aboriginal and Torres Strait Islander health training. Strategic plans aimed to achieve an increase in training capacity, training activity and the quality of Aboriginal and Torres Strait Islander health training in each region.

   Since implementation of the Strategic Plan Program in 2013 there has been significant growth in the number of registrars undertaking training in Aboriginal and Torres Strait Islander health training facilities.

   The Department will continue to fund the Strategic Plan Program 2016 -2018.
2. Registrar Salary Support Program
The Registrar Salary Support Program strengthens the capacity of ACCHSs to accommodate and employ an AGPT registrar at their service.

It aims to encourage GP registrars to undertake training at an Aboriginal and Torres Strait Islander training facility.

Long term objective of the Salary Support program is to improve access of Aboriginal and Torres Strait Islander peoples to culturally appropriate and holistic primary health care.

Salary Support covers the GP registrars’ salary and on-costs.

To be approved for Salary Support, the facility must be accredited in accordance with the vocational training standards and requirements published by RACGP and/or ACRRM, and approved by the National Aboriginal Community Controlled Health Organisation (NACCHO).

The Department will continue to fund the Registrar Salary Support Program in 2016, while a review of the current delivery through regional training providers is undertaken.
## 2011 ABS Census Data - All health professions

<table>
<thead>
<tr>
<th>Occupations</th>
<th>Indigenous</th>
<th>Non-Indigenous</th>
<th>Not stated</th>
<th>Total</th>
<th>Indigenous as a percentage of Non-Indigenous</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Diagnostic and Promotion Professionals nfd</td>
<td>5</td>
<td>151</td>
<td>0</td>
<td>156</td>
<td>3.31%</td>
</tr>
<tr>
<td>Dietitians</td>
<td>25</td>
<td>3668</td>
<td>14</td>
<td>3707</td>
<td>0.68%</td>
</tr>
<tr>
<td>Medical Imaging Professionals</td>
<td>20</td>
<td>13179</td>
<td>45</td>
<td>13244</td>
<td>0.15%</td>
</tr>
<tr>
<td>Occupational and Environmental Health Professionals</td>
<td>298</td>
<td>18541</td>
<td>86</td>
<td>18925</td>
<td>1.61%</td>
</tr>
<tr>
<td>Optometrists and Orthoptists</td>
<td>5</td>
<td>4278</td>
<td>20</td>
<td>4303</td>
<td>0.12%</td>
</tr>
<tr>
<td>Pharmacists</td>
<td>28</td>
<td>19840</td>
<td>67</td>
<td>19935</td>
<td>0.14%</td>
</tr>
<tr>
<td>Other Health Diagnostic and Promotion Professionals</td>
<td>569</td>
<td>5007</td>
<td>19</td>
<td>5595</td>
<td>11.36%</td>
</tr>
<tr>
<td>Health Therapy Professionals nfd</td>
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<td>169</td>
<td>0</td>
<td>169</td>
<td>0.00%</td>
</tr>
<tr>
<td>Chiropractors and Osteopaths</td>
<td>10</td>
<td>4312</td>
<td>26</td>
<td>4348</td>
<td>0.23%</td>
</tr>
<tr>
<td>Complementary Health Therapists</td>
<td>19</td>
<td>5896</td>
<td>34</td>
<td>5949</td>
<td>0.32%</td>
</tr>
<tr>
<td>Dental Practitioners</td>
<td>23</td>
<td>10916</td>
<td>49</td>
<td>10988</td>
<td>0.21%</td>
</tr>
<tr>
<td>Occupational Therapists</td>
<td>23</td>
<td>9193</td>
<td>32</td>
<td>9248</td>
<td>0.25%</td>
</tr>
<tr>
<td>Physiotherapists</td>
<td>78</td>
<td>15795</td>
<td>56</td>
<td>15929</td>
<td>0.49%</td>
</tr>
<tr>
<td>Podiatrists</td>
<td>5</td>
<td>2784</td>
<td>12</td>
<td>2801</td>
<td>0.18%</td>
</tr>
<tr>
<td>Speech Professionals and Audiologists</td>
<td>18</td>
<td>6766</td>
<td>15</td>
<td>6799</td>
<td>0.27%</td>
</tr>
<tr>
<td>Medical Practitioners nfd</td>
<td>3</td>
<td>1419</td>
<td>10</td>
<td>1432</td>
<td>0.21%</td>
</tr>
<tr>
<td>Generalist Medical Practitioners</td>
<td>129</td>
<td>43131</td>
<td>170</td>
<td>43430</td>
<td>0.30%</td>
</tr>
<tr>
<td>Anaesthetists</td>
<td>3</td>
<td>3752</td>
<td>9</td>
<td>3764</td>
<td>0.08%</td>
</tr>
<tr>
<td>Specialist Physicians</td>
<td>3</td>
<td>5449</td>
<td>20</td>
<td>5472</td>
<td>0.06%</td>
</tr>
<tr>
<td>Psychiatrists</td>
<td>8</td>
<td>2569</td>
<td>7</td>
<td>2584</td>
<td>0.31%</td>
</tr>
<tr>
<td>Surgeons</td>
<td>11</td>
<td>4900</td>
<td>15</td>
<td>4926</td>
<td>0.22%</td>
</tr>
<tr>
<td>Other Medical Practitioners</td>
<td>18</td>
<td>8572</td>
<td>30</td>
<td>8620</td>
<td>0.21%</td>
</tr>
<tr>
<td>Midwifery and Nursing Professionals nfd</td>
<td>3</td>
<td>351</td>
<td>0</td>
<td>354</td>
<td>0.85%</td>
</tr>
<tr>
<td>Midwives</td>
<td>70</td>
<td>13976</td>
<td>57</td>
<td>14103</td>
<td>0.50%</td>
</tr>
<tr>
<td>Nurse Educators and Researchers</td>
<td>21</td>
<td>5248</td>
<td>19</td>
<td>5288</td>
<td>0.40%</td>
</tr>
<tr>
<td>Nurse Managers</td>
<td>81</td>
<td>12497</td>
<td>53</td>
<td>12631</td>
<td>0.65%</td>
</tr>
<tr>
<td>Registered Nurses</td>
<td>1709</td>
<td>203966</td>
<td>1241</td>
<td>206916</td>
<td>0.84%</td>
</tr>
<tr>
<td>Health Professionals nfd</td>
<td>61</td>
<td>2041</td>
<td>13</td>
<td>2115</td>
<td>2.99%</td>
</tr>
<tr>
<td>Health and Welfare Support Workers nfd</td>
<td>68</td>
<td>706</td>
<td>3</td>
<td>777</td>
<td>9.63%</td>
</tr>
<tr>
<td>Ambulance Officers and Paramedics</td>
<td>216</td>
<td>11658</td>
<td>65</td>
<td>11939</td>
<td>1.85%</td>
</tr>
<tr>
<td>Dental Hygienists, Technicians and Therapists</td>
<td>30</td>
<td>6271</td>
<td>31</td>
<td>6332</td>
<td>0.48%</td>
</tr>
<tr>
<td>Diversional Therapists</td>
<td>43</td>
<td>4167</td>
<td>47</td>
<td>4257</td>
<td>1.03%</td>
</tr>
<tr>
<td><strong>Indigenous as a percentage of Non-Indigenous</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Category</td>
<td>Indigenous</td>
<td>Stated</td>
<td>N/A</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------------------------</td>
<td>------------</td>
<td>--------</td>
<td>--------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Enrolled and Mothercraft Nurses</td>
<td>287</td>
<td>17503</td>
<td>103</td>
<td>17893</td>
<td>1.64%</td>
</tr>
<tr>
<td>Indigenous Health Workers</td>
<td>1255</td>
<td>111</td>
<td>6</td>
<td>1372</td>
<td>N/A</td>
</tr>
<tr>
<td>Massage Therapists</td>
<td>75</td>
<td>10469</td>
<td>60</td>
<td>10604</td>
<td>0.72%</td>
</tr>
<tr>
<td>Psychologists</td>
<td>85</td>
<td>18448</td>
<td>71</td>
<td>18604</td>
<td>0.46%</td>
</tr>
<tr>
<td>Social Workers</td>
<td>462</td>
<td>16392</td>
<td>63</td>
<td>16917</td>
<td>2.82%</td>
</tr>
<tr>
<td>Welfare Support Workers</td>
<td>3575</td>
<td>46344</td>
<td>287</td>
<td>50206</td>
<td>7.71%</td>
</tr>
<tr>
<td>Personal Carers and Assistants</td>
<td>61</td>
<td>1344</td>
<td>17</td>
<td>1422</td>
<td>4.54%</td>
</tr>
<tr>
<td>Aged and Disabled Carers</td>
<td>2669</td>
<td>104590</td>
<td>956</td>
<td>108215</td>
<td>2.55%</td>
</tr>
<tr>
<td>Dental Assistants</td>
<td>266</td>
<td>18429</td>
<td>129</td>
<td>18824</td>
<td>1.44%</td>
</tr>
<tr>
<td>Nursing Support and Personal Care Workers</td>
<td>1438</td>
<td>68391</td>
<td>674</td>
<td>70503</td>
<td>2.10%</td>
</tr>
<tr>
<td>Special Care Workers</td>
<td>246</td>
<td>2528</td>
<td>20</td>
<td>2794</td>
<td>9.73%</td>
</tr>
<tr>
<td>Total</td>
<td>14022</td>
<td>755717</td>
<td>4651</td>
<td>774390</td>
<td>1.86%</td>
</tr>
</tbody>
</table>

Source: ABS 2011 Census: Employment, Income and Unpaid Work
Appendix C - Health Courses in the Vocational Education and Training Sector

Certificate II
- HLT20113 - Certificate II in Aboriginal and/or Torres Strait Islander Primary Health Care
- HLT23215 - Certificate II in Health Support Services
- HLT26015 - Certificate II in Population Health
- HLT21015 - Certificate II in Medical Service First Response
- HLT26115 - Certificate II in Indigenous Environmental Health

Certificate III
- HLT30113 - Certificate III in Aboriginal and/or Torres Strait Islander Primary Health Care
- HLT33015 - Certificate III in Allied Health Assistance
- HLT37315 - Certificate III in Health Administration
- HLT37015 - Certificate III in Sterilisation Services
- HLT37215 - Certificate III in Pathology Collection
- HLT37115 - Certificate III in Hospital/Health Services Pharmacy Support
- HLT37415 - Certificate III in Pathology Assistance
- HLT33115 - Certificate III in Health Services Assistance
- HLT35015 - Certificate III in Dental Assisting
- HLT31015 - Certificate III in Ambulance Communications (Call-taking)
- HLT36115 - Certificate III in Indigenous Environmental Health
- HLT35115 - Certificate III in Dental Laboratory Assisting
- HLT36015 - Certificate III in Population Health
- HLT33215 - Certificate III in Health Support Services
- HLT31115 - Certificate III in Non-Emergency Patient Transport
- HLT31215 - Certificate III in Basic Health Care

Certificate IV
- HLT40113 - Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care
- HLT47415 - Certificate IV in Audiometry
- HLT47515 - Certificate IV in Operating Theatre Technical Support
- HLT47015 - Certificate IV in Sterilisation Services
- HLT47815 - Certificate IV in Optical Dispensing
- HLT43015 - Certificate IV in Allied Health Assistance
- HLT42015 - Certificate IV in Massage Therapy
- HLT47615 - Certificate IV in Cardiac Technology
- HLT47715 - Certificate IV in Medical Practice Assisting
- HLT47315 - Certificate IV in Health Administration
- HLT47115 - Certificate IV in Hospital/Health Services Pharmacy Support
- HLT45015 - Certificate IV in Dental Assisting
- HLT41115 - Certificate IV in Health Care
- HLT46115 - Certificate IV in Indigenous Environmental Health
- HLT41015 - Certificate IV in Ambulance Communications (Dispatch)
- HLT46015 - Certificate IV in Population Health
Diploma
- HLT50113 - Diploma of Aboriginal and/or Torres Strait Islander Primary Health Care
- HLT50213 - Diploma of Aboriginal and/or Torres Strait Islander Primary Health Care Practice
- HLT52615 - Diploma of Ayurvedic Lifestyle Consultation
- HLT57915 - Diploma of Anaesthetic Technology
- HLT57415 - Diploma of Audiology
- HLT52015 - Diploma of Remedial Massage
- HLT52515 - Diploma of Reflexology
- HLT52215 - Diploma of Shiatsu and Oriental Therapies
- HLT52415 - Diploma of Kinesiology
- HLT52315 - Diploma of Clinical Aromatherapy
- HLT57715 - Diploma of Practice Management
- HLT52115 - Diploma of Traditional Chinese Medicine (TCM) Remedial Massage
- HLT55115 - Diploma of Dental Technology
- HLT51015 - Diploma of Paramedical Science
- HLT54115 - Diploma of Nursing

Advanced Diploma
- HLT60113 - Advanced Diploma of Aboriginal and/or Torres Strait Islander Health Care
- HLT62615 - Advanced Diploma of Ayurveda
- HLT64115 - Advanced Diploma of Nursing
- HLT65015 - Advanced Diploma of Dental Prosthetics