

#### National Aboriginal Community Controlled Health Organisation ABN 89 078 949 710

14/03/2012

#### The Aboriginal and Torres Strait Islander Health Practice Board of Australia (the Board) consultation on the following:

• Aboriginal and Torres Strait Islander Health Practice Board of Australia - Accreditation Committee Membership

#### **General Comments**

Thank you for the opportunity of commenting on this important consultation paper. Improving the Aboriginal and Torres Strait Islander health workforce is fundamental to closing the gap in Aboriginal and Torres Strait Islander life expectancy. NACCHO and its Affiliates are determined to pursue a good outcome for our people from the proposed national health reforms.

There had been some major communication work undertaken in lobbying Aboriginal people from across all jurisdictions in regards to understanding the role of the Aboriginal and Torres Strait Islander Health Practitioner Board, the new role/title of Aboriginal and Torres Strait Islander Health Practitioner and on this occasion the role of the Accreditation Committee Membership.

NACCHO is the national peak Aboriginal health body representing over 150 Aboriginal Community Controlled Health Services (ACCHS) throughout Australia. Therefore we believe NACCHO to be well placed to make informed comment in regards to this consultation. We trust that you will give the following comments due consideration.

It is paramount that the makeup of the Accreditation Committee is culturally appropriate.

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# 1. Do you agree with the proposed inclusion of an academic, an educationalist and at least one Aboriginal and Torres Strait Islander health practitioner?

The role of the Accreditation Committee member is to develop accreditation standards to submit to the board, assess programs of study and education providers and make recommendations and give advice to the National Board: then it is NACCHO's recommendation that the committee consist of <u>but not</u> <u>be limited to</u> an academic, an educationalist, and at least one Aboriginal and Torres Strait Islander health practitioner. The educationalist should currently employed by an Aboriginal Torres Strait Island Health Registered Training Organisation.

## 2. Do you think a community representative should be on the Accreditation Committee?

Community members who have/had experience and/or expertise in either delivery of training or clinical practice should be encouraged to nominate for a position on the Accreditation Committee. They will bring added expertise to the committee.

#### 3. Do you think anyone else should be on the committee?

Ideally there would be an additional Aboriginal and Torres Strait Islander Health Worker with Primary health Care experience, an Aboriginal and Torres Strait Islander Health Worker with Clinical experience and an additional Aboriginal Torres Strait Islander educationalist; that may or may not be still practising.

## 4. Do you think there should be specific criteria for the selection of the above persons and if so what should they be e.g. VET sector experience and/or clinical experience?

Preferably the above persons would ideally have Aboriginal Primary health Care experience, and at least one person should have clinical experience. These persons may be selected from both sectors to ensure a balance within the committee.

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#### 5. **Do you think a Board member should be on the Accreditation Committee**?

No. If it is agreed that a Board member can be part of the Accreditation Committee, then it should solely be for the purpose of observer, and only to facilitate communication.

### 6. How many members do you think the committee should have?

It is our view that to limit the committee to three members is fraught with difficulties to obtain a quorum, which can and will occur with conflicts of interest, absentee due to priority personal and professional business, illness, and annual leave. A minimum of seven committee members should be sought with a quorum of four.

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