



## Central and Eastern Sydney Mental Health and Suicide Prevention Regional Plan Update

**The Central and Eastern Sydney Mental Health and Suicide Prevention Regional Plan was launched in Mental Health Month (October) 2019. The Regional Plan aims to improve the mental health, physical health and wellbeing of people with or at risk of mental illness.**

Since the launch, the Implementation Committee has been hard at work making the plan a reality. To assist them in this endeavour a number of working groups and sub-committees have been established so that local leaders and community members can work collaboratively to implement change in our region.

Priority Area 4 of the regional plan focuses on Aboriginal and Torres Strait Islander Mental Health and Suicide Prevention. To ensure specialist expertise and advice, the Aboriginal Mental Health and Suicide Prevention Working Group has been formed.

Chaired by Lisa Merrison, CESPHN Aboriginal Health & Wellbeing Programs Manager, with representatives from the local community, community managed organisations and the local health districts the Working Group has met in February and May 2020.

The focus of discussion has been on selecting action items in the regional plan to address in year one of the three-year plan and what success may look like when they are realised. One area of work had been on supporting and growing the Aboriginal health workforce. The working group are exploring innovative ways that they can help grow both quality and quantity of Aboriginal health workers on the ground supporting their community as well as in administrative and managerial roles. The working group is looking forward to reporting on their progress in the next Eora Messenger.



### IN THIS ISSUE

**Direct from the GM**

PAGE 2-3

**Strengthening Our Mob Program**

PAGE 7

**National Diabetes week**

PAGE 10 - 11

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CENTRAL AND EASTERN SYDNEY

An Australian Government Initiative



# Direct from the GM

Welcome to the Winter edition of the Eora Health Messenger! Over the last 3 months we faced extraordinary circumstances in dealing with the challenge of managing the impact of the coronavirus.

## COVID-19

As we gradually see a return to business, we are continuing to support our commissioned services deal with the impact of COVID. We are heavily focussed on Telehealth and in undertaking further initiatives to support general practice, allied health and commissioned providers. We also continue to supply masks to GPs/ Pharmacies and now some Allied Health professionals.

The current focus is on testing and encouraging those with symptoms of COVID-19 (fever, cough, scratchy throat, shortness of breath) to get tested. Everyone should keep observing physical distancing guidelines and continue to practice and encourage others to practice good personal hygiene.

More information, resources and useful links can be found at our website <https://www.cesphn.org.au/coronavirus>

## CESPHN Aboriginal Health and Wellbeing program Officer

Welcome Karina Crutch to the Clinical Services team as the Aboriginal Health and Wellbeing Program Officer. We are very excited to have Karina join the team and she looks forward to meeting with you all in the coming months.

## Reconciliation Action Plan

CESPHNs 2018-2020 Innovate RAP has over 40 actions under three categories: Relationships, Respect and Opportunities. The

actions developed and implemented over the past two years are coming to fruition. The mutual understanding, growth and rapport building with community members and Aboriginal organisations has been highly beneficial. Opportunities for collaborative work to help meet the needs of the local communities have been opened. We hope we have also contributed to help empower the Aboriginal communities within the CESPHN region.

CESPHN has already started planning for our 2020 – 2022 RAP and looks forward to continuing our reconciliation journey.

## Mental Health and Suicide Prevention Regional Plan - Aboriginal health and wellbeing working group

The working group has met on two occasions since inception earlier this year. The group has identified priorities and will focus on the workforce, particularly supervision and mentoring and, the development of a commissioning framework for services working with Aboriginal communities.

## PSS Bushfire Relief

We have received additional funding to support individuals who have been affected by the Australian bushfires, which will be delivered over the next 2 years by our 4 main PSS consortiums. Promotional work around these additional services will commence in July/August 2020.

## Headstart

This new mental health service navigation tool supports a person searching for a local service to best meet their needs in a quick and effective manner. This will be co-designed by the CES MH SP Regional Planning Implementation Committee.

## Babana Aboriginal social media campaign



Babana will be delivering a social media campaign to increase health literacy. This will involve help linked to COVID-19 for Aboriginal & Torres Strait Islander Community Members, including how to stay connected, keep elders safe, access testing, medical support and maintain wellbeing. In the first week, the campaign reached 9,413 people which led to 193 contacts from people seeking help who were then referred to appropriate services. They will also continue with after-hours health service promotion post the peak of the COVID-19 pandemic.

## New headspace funding to reduce wait times in centres

There has been a sharp rise in access to headspace online services and this funding will strengthen services in their ability to reach young people. Forty-five centres across Australia received this additional funding, and in CESPHN, four of our five centres were successful in the grant submission – Bondi Junction, Camperdown, Hurstville and Miranda. See press release here.

## Aboriginal Specific Suicide Prevention Model of Care

CESPHN commissioned Origin Consultancy to do a scoping document exploring appropriate models of care for suicide prevention/ postvention services.





As a result, a new program specifically for Aboriginal and Torres Strait Islander peoples in CESPHN will commence in 2020. The document provides a comprehensive report based on direct locally based community consultations, evidence-based research and best practice methodology to inform the most appropriate model of care for communities in the CESPHN region.

### Evaluation of the National Psychosocial Support programs

AGDoH has engaged Nous Group to undertake a national evaluation of the NDIS support programs, looking at the experiences of PHNs, providers, consumers and carers. The evaluation will look at program implementation and service delivery, improvements to accessing supports, and perspectives to improve the future of psychosocial supports. We will be assisting Nous Group in their evaluation alongside Flourish (NPS) and Neami (CoS).

**Alcohol and Other Drugs Treatment Guidelines for working with Aboriginal and Torres Strait Islander People** - NADA (the drug and alcohol peak body for NSW) have launched the - Alcohol and Other Drugs Treatment Guidelines for working with Aboriginal and Torres Strait Islander People. This resource has been developed to support non-Aboriginal service providers in the AOD sector to establish better relationships and linkages with Aboriginal organisations and in Aboriginal communities. The Guidelines also provide practical guides and resources to support workers and organisations to improve their service delivery when working with Aboriginal service users. Download this resource from the NADA website and also from the CESPHN Drug and Alcohol webpages here. This activity was a co-commissioned activity led by CESPHN and co-commissioned by 5 other NSW PHNs working together with NADA.

### Successful Conference Abstracts

Two abstracts from the clinical stream have been accepted to present at TheMHS (Annual Australia/NZ MH Conference) - 'Practical Approaches to the Co-Production of a Regional Mental Health and Suicide Prevention Plan' by Cat Goodwin and 'Aboriginal Community Collaboratives: Harmonising Clinical and Cultural Care in Practice' with Lisa Merrison and Babana Aboriginal Organisation.

### Aboriginal and Torres Strait Islander specific MBS item 715:

CESPHN continues to work with GPs, practices and the community to increase the uptake of Aboriginal and Torres Strait Islander specific Medicare Benefits Schedule (MBS) items, including Health Assessments for Aboriginal and Torres Strait Islander people.

### Mariam Faraj

*CESPHN General Manager, Clinical Services*

## Introduction to CESPHN Aboriginal Health and wellbeing programs Officer

Hi, I'm Karina, I would like to introduce myself as the new Aboriginal Health and Wellbeing Programs Officer at CESPHN.

I am of Barkindji descent and was born and raised in Jerilderie, a small country town in the Riverina of NSW- 1.5 hrs west of Wagga Wagga.

I am an Endorsed Enrolled nurse and have worked in many small rural facilities, along with some agency nursing in West QLD, FN QLD and Nth/west NSW- predominately highly populated Aboriginal communities.

From this work I then decided for a sea change in Gippsland Victoria. And it was here that started my career in Aboriginal health programs and projects.

I have a varied work history from the last several years holding different roles in Aboriginal health from working in health promotion, chronic disease worker in the old ITC program to practice manager in Aboriginal Medical Service.

Some of my hobbies and interests include hiking, bike riding, fishing, woodwork, kayaking and have been known to enjoy a game of darts in the shed.

I look forward to getting out and about and meeting everyone when we can.

I can be contacted at [k.crutch@cesphn.com.au](mailto:k.crutch@cesphn.com.au).



Me participating in a trek for Multiple sclerosis (MS) on the Larapinta trail (NT) June 2019



Central and Eastern Sydney PHN acknowledges the Aboriginal and Torres Strait Islander peoples of this nation. We acknowledge the Traditional Custodians and Sovereign People of the land across which we work. We recognise their continuing connection to land, water and community and pay respect to Elders past, present and emerging.

# NADA Releases the Alcohol and other drugs treatment guidelines for working with Aboriginal and Torres Strait Islander people – in a non-Aboriginal setting

Source: Network of Alcohol and Other Drug Agencies (NADA)- [nada.ogr.au/resources](http://nada.ogr.au/resources)

The 'Alcohol and Other Drugs Treatment Guidelines for working with Aboriginal and Torres Strait Islander People' resource has been developed to support non-Aboriginal service providers in the AOD sector working with Aboriginal and Torres Strait Islander People.

While we know that Aboriginal Community Controlled Health Organisations are essential in the provision of specialist AOD treatment for Aboriginal people, it is important that non-Aboriginal service settings are safe and accessible for Aboriginal people who access these services.

The Guidelines are intended to support services to establish effective relationships and linkages with Aboriginal organisations and in Aboriginal communities. The Guidelines also provide practical guides and resources to support workers and organisations to improve their service delivery when working with Aboriginal service users.

'It's been really positive for us, and I think it's given us a really good framework of where we need to step up and what we can be doing a little bit more ... and what things will be looking like for us to move forward to be working in a safe place for our clients.' Manager of a participating service

The guidelines are now available online [here](#)

The project was funded and supported by a consortium of six Primary Health Networks and in consultation with Aboriginal Drug and Alcohol Residential Rehabilitation Network (ADARRN), the Aboriginal Health and Medical Research Council (AH&MRC) and members of the Aboriginal Drug and Alcohol Network (ADAN). The guidelines have been evaluated by UNSW National Drug and Alcohol Research Council (NDARC).

For more information regarding this resource please email Raechel Wallace at NADA on [raechel@nada.org.au](mailto:raechel@nada.org.au).

## NRW FOLLOW UP

**National Reconciliation Week was celebrated from 27 May – 3 June. We hope many of you have participated and celebrated in some way.**

Karina developed and shared x2 quizzes and there was great response which we shared in the Sydney Health Weekly and various emails. Many found it fun and educational.

For us internally, we also participated in the quizzes and some people were rewarded with indigenous inspired prizes. Photos were shared of staff working from home, researching and acknowledging the traditional custodians of the lands in which they live, and some staff shared photos of bush tucker or significant sites in their local areas.

We thank you for your efforts and contribution to Aboriginal Health and Reconciliation.

More information on our Aboriginal Health and Wellbeing program, resources and services can be found here- [links to website](#)

**GP** - <https://www.cesphn.org.au/general-practice/help-my-patients-with-services-aboriginal>

**Services** - <https://www.cesphn.org.au/community/services-in-your-region/services-aboriginal-3>





# Apricot Chicken- Main, Gluten Free

A quick, easy and modern take on an old favourite. This apricot chicken dish from Diabetes Australia website not only looks great but tastes sensational, bursting with sweet and sour flavour that suits most palates.

## Ingredients

- 2 teaspoons corn flour or gluten-free cornflour
- 400g apricot halves in natural juices, drained, juice reserved
- 1/4 cup SPLENDA® Granulated
- 1/2 teaspoon olive oil
- 1 brown onion, halved, thinly sliced
- 500g skinless chicken breast fillets, trimmed of fat
- 2/3 cup basmati rice
- 2 bunches broccolini, steamed, to serve
- 200g sugar snap peas, trimmed, steamed, to serve
- 250g yellow squash, quartered, steamed, to serve

## Method

1. Put the cornflour in a small bowl. Gradually whisk in the reserved apricot juice until smooth. Stir in the SPLENDA® Granulated. Set aside.
2. Brush half the oil over the base of a large non-stick frying pan. Heat over medium heat.
3. Add the onion and cook, stirring occasionally, for 5-6 minutes or until the onion starts to soften.
4. Increase heat to medium-high and add the chicken. Cook for 2 minutes each side or until just browned.
5. Add the SPLENDA® Granulated mixture and apricot halves to the pan. Bring to a simmer.
6. Reduce heat to low and cook, covered, for 6 minutes or until the chicken is just cooked.
7. Meanwhile, cook the rice in a small saucepan of boiling water following packet directions, or until tender. Drain.
8. Divide the rice among serving plates.



## Details

- Serves 4
- 10 Ingredients
- 10 Minutes Prep
- 10 Minutes Cook
- Easy

## Nutrition

- Energy 1655kJ
- Protein 36.3g
- Fat (total) 8g
- Saturated Fat 2.3g
- Carbohydrate (total) 43.2g
  - Sugar 13.1g
  - Fibre 8.4g
  - Sodium 92mg



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# MY HEALTH RECORD IS AN ONLINE SUMMARY OF YOUR KEY HEALTH INFORMATION

**When you have a My Health Record, your health information can be viewed securely online, from anywhere, at any time – even if you move or travel interstate. You can access your health information from any computer or device that’s connected to the internet.**

Whether you’re visiting a GP for a check-up, or in an emergency room following an accident and are unable to talk, healthcare providers involved in your care can access important health information, such as:



allergies



medicines you are taking



medical conditions you have been diagnosed with



pathology test results like blood tests.

This can help you get the right treatment. You don’t need to be sick to benefit from having a My Health Record. It’s a convenient and free way to record and track your health information over time.

Next time you see your doctor, ask them to add your health information to your My Health Record.

By allowing your doctors to upload, view and share documents in your My Health Record, they will have a more detailed picture with which to make decisions, diagnose and provide treatment to you. You can also ask that some information not be uploaded to your record.

## The benefits are:

- You will no longer have to repeat every information to multiple care providers, recall every medication, test or health event
- You can give permission to family members, carers or other trusted people to view your health information
- You decide who can access your electronic health record
- Your health information will be available to healthcare providers treating you for the first time.
- Your health information will be available in an emergency when attending participating hospitals
- Your information travels with you
- You will be required to use your MyGov account or to register [here](#)

For more information follow link [here](#)

Aboriginal specific resources for community can be found [here](#)







# STRENGTHENING OUR MOB PROGRAM

**Strengthening Our Mob is a place-based social and emotional wellbeing program within the La Perouse Aboriginal community in Sydney. The program offers a dedicated team of four staff members who provide holistic case management support to members of the La Perouse Aboriginal Community who are experiencing or suffering challenging times.**

The team, locally known as SOMs, often provides support for mob who need support in navigating the justice system, housing support, clinical and medical, employment and education.

This Strengthening Our Mob program, was designed by leaders of the La Perouse Aboriginal community to service the needs of the La Perouse Aboriginal community. The program is funded by the Primary Health Network and the National Indigenous Australians Agency.

The PHN supports the Youth Wellbeing Coordinators who focus on Aboriginal youth aged 12 to 25 years of age.

## Justice

The SOMs team have built a positive relationship with the NSW Police and often provide cell support for Aboriginal youth who have been taken into custody at the local police station.

Additionally, our team often provide support to young person who attend court to assist them navigate a complicated process and increase their knowledge and understanding of their rights within the justice system.

The NSW Court recognise the Strengthening Our Mob program and a merit based program that is taken into account by magistrates.

## Housing

With our community's population growing and the limited housing available, overcrowding with homes within our community is an increasing issue. Our Wellbeing Coordinators assist clients with applications for social or affordable housing in the local area to allow for community members to stay connected with their family and community.

## Clinical and medical

Our team assists community members to attend their medical appointments by providing transport and support, including medical, psychologist, drug and alcohol counselling.

## Employment and education

The SOMs team are often the conduit between small to large companies seeking Aboriginal employment. We provide support with interview and job readiness.

The Youth Wellbeing Coordinators continually attended the local high school to speak with students discuss education and employment opportunities available to them.

The SOM team have also provided information sessions for a number of social and emotional wellbeing areas including managing stress, anxiety and depression, understanding mental health, grief and loss and drug and alcohol awareness.

Our program has partnered with WEAVE Youth and Community Services to deliver the Driving Change Program to assist community members gain their driver's license. Previously we had partnered with the Black Dog Institute to undertake a research trial to develop a suicide prevention app.

Strengthening Our Mob looks forward to providing Eora News Messenger with further updates into the future.



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# headspace

Hi everyone,

**During COVID, we've been adapting to working with via telehealth – all our appointments are via a video linkup though a secure website. People can link from their phone, tablet, laptop etc.**

While some people like this more than others, we've found that we can still make it work, and connect well.

All our services are still available via telehealth. They are free and confidential for 12-25 year olds. We have:

- Doctors (and if you need to be seen in person, we can organise that)
- Mental health clinicians (free to talk to, and great at helping you work through tough issues, difficult feelings, and coming up with strategies to manage daily life challenges)
- School support worker – if kids are stressed about school, and worrying about or refusing to attend. She's great at finding alternatives to schooling too – whether TAFE or trades or other courses you can do.
- Exercise Physiologist – because looking after our physical health can really help our feelings and our overall wellbeing.

And our Sexual Health Clinic has just started back offering in-person services – open 1pm-5pm Mondays and 2pm-6pm Wednesdays. Our sexual health nurses can do STI tests, provide contraception and contraception advice, pregnancy tests, and sexual health advice.

And lastly, don't forget headspace's online services – see [yarnsafe.org.au](http://yarnsafe.org.au) for great resources, as well as [headspace.org.au](http://headspace.org.au), for resources, webchat and advice for parents. We've had some fun with our social media, so follow us on facebook and Instagram for great tips around staying healthy and well.



📞 9366 8800

📷 [headspace\\_bondi\\_junction](https://www.instagram.com/headspace_bondi_junction)

📘 [headspacebondijunction](https://www.facebook.com/headspacebondijunction)

*To find out about services other headspace centres offer, call the centre directly*

**Hurstville:** 8048 3350

**Miranda:** 9575 1500

**Ashfield:** 9193 8000

**Camperdown:** 9114 4100





# headspace Ashfield

## Hello from the Aboriginal Outreach Workers at Ashfield headspace!

It has been quite a significant year so far, with CoVid-19 pandemic we have experienced many challenging situations and this pandemic has touched many people's lives. During this time, we hope you and your loved ones are staying safe and we are hopeful that things will slowly but surely get better.

Usually we spend a lot of our time out and about in the community and meeting with people face to face and attending community events and meetings, although recently we have been working from home. Working from home limited the way we could work with our community and young people although this created a great opportunity to explore ways in which we can provide the right support our young people needed during this time. We began to put some ideas together and created our Yarn program. The idea of the Yarn program is to better support our local Aboriginal and Torres Strait Islander young people and assist them to connect with relevant services and support they need. We have recently started promoting our Yarn program and are off to a great start as we have started connecting with some young people within our region. We are hoping our Yarn project can be a space we can build rapport and trust and to create a safe space for young people to explore their thoughts, feelings and ideas. If you have any queries please feel free to email us on [yarn@newhorizons.org.au](mailto:yarn@newhorizons.org.au).



We are grateful to have the opportunity to be able to work alongside our young people and our community and provide support when it matters most. Please feel free to contact us at our Ashfield centre on 91938000 to seek any advice in relation to the services we provide at headspace or simply just to have a yarn!

**Natasha Janif & Jada Whyman**



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# National Diabetes week- July-12-18

**Indigenous Australians are three times more likely to develop type 2 diabetes than non-indigenous Australians. Type 2 diabetes is a serious disease that can lead to life-threatening complications. If you're living with type 2 diabetes there is a lot you can do to manage it and live well. And for those who may be at risk, there is a lot you can do to lower your chances of developing type 2 diabetes. Healthy eating and physical activity will help maintain a healthy weight to keep your sugar (glucose) levels normal and your body strong.**

## What is it? (About diabetes)

Sugar (glucose) come from some of the food you eat and drink and gives your body energy. The sugar (glucose) moves from your blood into your muscles with something called insulin which is made in the pancreas (near the stomach). It keeps your sugar (glucose) levels normal in your body.

Everyone has a little bit of sugar (glucose) in their blood. The optimum sugar (glucose) level is between 4 to 6 mmol/L (after fasting).

With diabetes your pancreas and insulin aren't working properly so there isn't enough insulin. This means the sugar (glucose) doesn't get into your muscles and body efficiently, resulting in excess sugar (glucose) in your blood.

Sugar stays and builds in your body, making your blood sugar (glucose) level high.

## Type 2 Diabetes

There are different types of diabetes. A lot of Aboriginal and Torres Strait Islanders have type 2 diabetes. Type 2 is when your body stops the insulin working properly.

Fat bellies, not being active enough, eating a big mob of fatty food can stop the insulin working properly in your body.

Being active, eating healthy and being a healthy weight can help your insulin work better to keep your sugar (glucose) normal. Sometimes people might need to take tablets and insulin every day to keep their sugar (glucose) levels normal.

## Pre Diabetes

There is also Pre Diabetes or Impaired Glucose Tolerance (IGT). This happens when your sugar (glucose) level is high,

but not high enough to be called diabetes. It doesn't mean you have diabetes now, but it does mean you might get it later. Being active and eating healthy you can slow down the start of type 2 diabetes.

## What do I do? (Management of diabetes)

When there is too much sugar (glucose) in your blood it damages your heart, kidneys, feet, eyes and nerves.

You can keep your sugar (glucose) levels normal by:

### Eating healthy

- Have something from each of the core food groups every day. They give you energy, fights sickness and help care for your body to keep it strong
- Drink plenty of water
- Have shop foods and home cooked meals that are low in fat, sugar and salt

### Avoid or eat less fat, sugar and salt

- Pick meat with no fat or only small bits of fat on it. Cut the fat off the meat and take the skin off chicken.
- Drain the juices (fat) after cooking meat and scoop out the fat from the top of stews
- Avoid cooking with or having fats like butter, oil, margarine or dripping
- It is better to boil, steam, stew, grill, microwave or stir-fry food

### Being a healthy weight (not too fat and not too skinny)

- Do this by eating less, eating healthy and being more active

### Keeping active

- It helps you lose weight and keep it off and it keeps you healthy
- It helps your insulin to work properly
- Be active for 30 minutes or more every day OR do 10 minutes 3 times a day.

### Taking your medicine

- Take your medicine at the times the doctor tells you



## Remember to:

- Have your check-ups with your doctor, health worker or nurse. Have regular check-ups for your eyes, feet, kidneys, blood pressure, skin and teeth. If you notice anything different about your body talk to your doctor, health worker or nurse
- Check your sugar (glucose) levels at the times your doctor, health worker or nurse tells you
- See your doctor, health worker or nurse straight away if you feel sick

- Check your feet and skin for sores and/or cracks every day

More information on the National Diabetes Services Scheme (NDSS) further in this edition.

More information can be obtained by visiting:

**Diabetes Australia**- <https://www.diabetesaustralia.com.au/aboriginal-and-torres-strait-islanders>

**Diabetes NSW**- <https://diabetesnsw.com.au/helpful-resources/diabetes-information-sheets/our-indigenous-factsheets/>

# NATIONAL DIABETES SERVICES SCHEME (NDSS)

The National Diabetes Services Scheme (NDSS) is an initiative of the Australian Government that commenced in 1987 and is administered with the assistance of Diabetes Australia.

The NDSS aims to enhance the capacity of people with diabetes to:

- understand and self-manage their life with diabetes
- access services, support and subsidised diabetes products.

If you are living with diabetes and registered with the NDSS, you can access our services through:

- Access Points, usually community pharmacies
- NDSS Agents, usually your local diabetes organisation.

## The NDSS provides:

- support services for practical help and guidance
- diabetes and health information and resources
- subsidised products.

NDSS subsidised products are available through NDSS Access Points. Access Points are usually your local community pharmacy. To access

these products, you need to register with the NDSS.

Not sure where to find your nearest Access Point? call the NDSS Helpline on **1800 637 700**.

To help you self-manage your diabetes, the NDSS gives you access to a range of subsidised products. These products include:

- blood glucose testing strips (restrictions apply to people with type 2 diabetes who do not use insulin)
- urine testing strips
- insulin syringes and pen needles (if you need insulin or approved non-insulin injectable medications)
- insulin pump consumables (for people with type 1 diabetes or gestational diabetes who meet certain eligibility criteria)
- continuous glucose monitoring products (for people with type 1 diabetes and specific 'other' conditions who meet certain eligibility criteria).

The NDSS information, education and support services help you to manage your diabetes. You can access these services through your local NDSS Agent.



## Need more help?

The NDSS Helpline on **1800 637 700** can provide advice on:

- managing your diabetes
- available support programs.

More information on services and registering can be found **here**



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# CESPHN RECONCILIATION ACTION PLAN PROGRESS

## OUR RECONCILIATION ACTION PLAN (RAP) IS TWO YEARS OLD

CESPHN launched its first Reconciliation Action Plan (RAP), the two year Innovate Plan, in May 2018. Now two years down the track, we'd like to share some of the achievements and how the plan has affected and changed our organisation for the better.

The RAP was introduced to reinforce CESPHN's commitment to foster positive relationships with Aboriginal and Torres Strait Islander peoples and communities, and ensure our practices and programs reflect this vision. Our external Aboriginal Advisory Committee provides advice on the development of the plan and its strategies. We have a cross organisation RAP working group that meets monthly to monitor progress against implementation of the RAP.

CESPHN Aboriginal Health and Wellbeing Advisory Committee member Bill Ramage says, "In the past two years since CESPHN's Reconciliation Action Plan came into play I've seen more interaction with the organisation and Aboriginal people in many areas.

They have been working with GPs encouraging the 715 health assessments and asking whether patients identify as Aboriginal or Torres Strait Islander. They have many Aboriginal people employed through commissioned services and have been inclusive with Practice Support, mental health, immunisation and NDIS programs all working with community.

Currently the plan has over 40 actions under three categories:

- Relationships (communication and engagement)
- Respect (training and learning)
- Opportunities (employment, retention and procurement)

As an organisation, some of the benefits we have seen by implementing the RAP are:

### RELATIONSHIPS

Our aim was to increase Aboriginal and Torres Strait Islander people's involvement with the organisation.

We now have Aboriginal people on our RAP working group, community advisory and job interview panels along with community members and Aboriginal staff representing other organisations contributing to our programs.

We are finding the mutual understanding, growth and rapport building with community and Aboriginal organisations has been highly beneficial.

### RESPECT

We promote and provide cultural awareness training to health service providers. This includes face-to-face opportunities that enhance the skills and knowledge of GPs and health care workers across the region when working with Aboriginal and Torres Strait Islander clients.

We also provide regular cultural awareness and engagement training and activities for our staff. Online cultural e-modules are distributed to staff on induction and our staff come together to celebrate important events such as National Reconciliation Week.

Welcome and Acknowledgement of Country are used for CESPHN meetings, events and functions resulting in our staff and all participants having a better understanding of the meaning and significance of Aboriginal and Torres Strait Islander protocols. Our organisation email signatures also include Acknowledgement of Country.

Our meeting and function rooms have been named in honour of Aboriginal and Torres Strait Islander people and places of significance, in consultation with the Aboriginal Advisory Committee. Plaques explaining the background of the people and places are displayed outside each room. Our office contains numerous artworks from local Aboriginal artists and we proudly display Aboriginal flags in our meeting rooms and at CPD events.

### OPPORTUNITIES

Our aim has been to increase procurement of goods and services from local Aboriginal and Torres Strait Islander companies. As a result we are developing deeper relationships with a number of Aboriginal-owned companies and currently have contracts in place with catering and printing/design services. These seemingly small changes can make a big difference to small locally run Aboriginal businesses.

From our Aboriginal specific commissioned services and other organisations we work with, 14 Aboriginal people are currently employed into the programs. We created the Aboriginal Workers Circle for these employees to get together in a safe space and share their experiences and lend support to each other.

With the goal of increasing the number of Aboriginal staff working with us we have developed an Aboriginal staff



employment and retention strategy. The majority of our interview panels now include an Aboriginal representative. While we are yet to meet our target of 3% Aboriginal staff, the changes we have put in place should help us attract and retain Aboriginal staff.

The actions that have been developed and implemented over the past two years are coming to fruition largely with the RAPs created opportunities for expanded contacts and communications. This not only benefits us and the way we interact with Aboriginal community and organisations, but also empowers the community through involvement and value of position in society.

We highly recommend developing a reconciliation action plan to other organisations.

For further information on Reconciliation Australia please visit <https://www.reconciliation.org.au/>

To download a copy of the CESP HN RAP, please visit <https://www.cesphn.org.au/who-we-are/reconciliation-action-plan>

CESPHN has started planning for our 2020 – 2022 RAP and looks forward to continuing our reconciliation journey.

# Dental Health week August 3-9

**Dental Health Week (DHW) is the Australian Dental Association’s (ADA)’s major annual oral health campaign. It takes place each year in the first full week of August and this year DHW will be August 3 – 9. The ADA and this campaign aim to educate Australians about the importance of maintaining good oral health by promoting four key messages:**

- Brush twice a day with fluoride toothpaste.
- Clean between your teeth daily using floss or interdental brushes.
- Eat a healthy, balanced diet and limit sugar intake.
- Visit the dentist regularly for check-ups and preventive care.

The focus of this year’s campaign is on the harm sugar does to oral health, aiming to help Australians to ‘get sugar savvy’. The campaign includes recommended daily sugar

consumption levels, advice on reading food labels and spells out the effect sugar has on our teeth. This information is reinforced with three main sugar messages:

- Consume no more than 6 teaspoons (24 grams) of free sugar per day as recommended by the World Health Organization (WHO).
- Choose foods with less than 10 grams of sugar per 100 grams.
- Look out for hidden sugars when purchasing foods and drinks.

These important messages will be reinforced via the tagline: ‘How much sugar is hiding in your trolley?’, which draws on the concept of hidden sugars and reading food labels in order to make healthy choices. Making healthy choices at the supermarket extends to making similar smart food and drink choices at home. Saying ‘no’ to an unhealthy item in the supermarket means you don’t have to continue to say ‘no’ at home.

Tempting as it is to think that everyone is practicing good oral health, the reality is that the oral health of many Australians is not where it should be.

- Less than 50% of Australians adults have had a dental check-up in the last 12 months.
- 53% of Australians brush their teeth only once-a-day.

- Nearly 40% never floss or clean between their teeth.
- 73% of young people (14-18 years) are consuming too much sugar.
- 47% of adults (18+ years) are consuming too much sugar.

There are multiple ways to access sugar information as part of Dental Health Week this year. A visit to your dentist is great for face-to-face advice where your questions can be answered. If you don’t have a regular dentist, check out the ADA’s Find A Dentist site to locate one nearby.



Central and Eastern Sydney PHN acknowledges the Aboriginal and Torres Strait Islander peoples of this nation. We acknowledge the Traditional Custodians and Sovereign People of the land across which we work. We recognise their continuing connection to land, water and community and pay respect to Elders past, present and emerging.



# Aboriginal and Torres Strait Islander Closing the Gap Scripts

## Who are Closing the Gap Scripts for?

If you:

- are of Aboriginal or Torres Strait Islander descent
- attend an accredited GP practice that has signed on for the indigenous Health Incentive
- have an existing chronic disease or at risk of a chronic disease.

### What is chronic disease?

A chronic disease is an ongoing illness you have had or are likely to have for at least 6 months. Some examples of chronic diseases include:



asthma



kidney Disease



cancer



diabetes



heart disease

Your doctor may offer you a health assessment to help you find out if you currently have or are at risk of developing a chronic disease.

Your doctor might ask you at your next visit if you would like to participate in the PBS Co-payment Measure (also known as Closing the Gap scripts). You will be asked to fill out a consent form which will be provided by the practice. The practice can assist you. Your doctor will ask you for your written consent. You might also want to consider doing this for any children in care.

It's always best to attend your usual doctor to help make sure you are being cared for by people who know you and have a complete health and medication history.

If a new doctor becomes your regular care provider, you do not have to re-register for the PBS Co-payment Measure (Closing the Gap Scripts) with a new doctor.

## Why register?

If you are eligible to participate in the scheme, PBS listed medicines will be cheaper for you to help you better manage or prevent illness. If you are a general patient, you will only have to pay the concession rate for each medicine. If you speak to your chemist, they can confirm how much you will be charged.

If you have a Centrelink or DVA concession card, or if you or your family has reached the PBS safety net threshold. Then you will not have to pay a co-payment. But there may still be a mandatory premium to pay for a small number of medicines.

Access to this initiative will be available through Aboriginal Medical Service and mainstream health services registered for the Indigenous Health Incentive. It is not available with hospital issued prescriptions.

Patient eligibility for access to Closing the Gap (CTG) scripts is determined by the treating doctor. Only medicines listed on the PBS are included in this initiative.

## Need more information?

- Talk to your usual doctor or health service staff
- Contact the CESP HN Aboriginal Health Team on 1300 986 991
- Call the Pharmaceutical Benefits Scheme Co-payment measure line on 02 9799 0933 from 9am – 5pm
- Go to [www.health.gov.au/tackling-chronic-disease](http://www.health.gov.au/tackling-chronic-disease)
- Email [pbs-indigenous@health.gov.au](mailto:pbs-indigenous@health.gov.au)

If you no longer wish to access the Closing the Gap scripts initiative (otherwise known as PBS Co-payment Measure), you can stop participating at any time. You just need to ask your doctor for a “withdrawal of patient consent form”.

To achieve the best health outcomes, follow your treatment plan and attend all appointments.

If you need assistance attending appointments or collecting medications, you may be entitled to the support of an Aboriginal Outreach Worker. For more information please contact the CESP HN Aboriginal Health Team on 1300 986 991



# LET'S KEEP OUR MOB SAFE FROM FLU

## GET THE FLU VACCINE TODAY.



The **INFLUENZA** vaccine is **FREE** for all Aboriginal and Torres Strait Islander people aged 6 months and over



Talk to your Aboriginal Health Practitioner or Worker, GP or nurse about getting vaccinated.

[health.gov.au/immunisation](http://health.gov.au/immunisation)



Australian Government  
Department of Health



National Immunisation Program

A joint Australian, State and Territory Government Initiative



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# Useful numbers

**PRINCE OF WALES HOSPITAL**  
02 9382 2022

**SYDNEY CHILDREN'S HOSPITAL**  
02 9382 1111

**ROYAL PRINCE ALFRED HOSPITAL**  
02 9515 6111

**ST VINCENT'S HOSPITAL**  
02 8382 1111

**SYDNEY DENTAL HOSPITAL**  
02 9293 3333

**LA PEROUSE HEALTH CENTRE**  
02 8347 4800

**BABANA ABORIGINAL**  
02 9660 5012

**WEAVE YOUTH AND COMMUNITY SERVICES**  
02 9318 0539

**TRIBAL WARRIOR ABORIGINAL CORPORATION**  
02 9699 3491

**GAMARADA**  
0433 346 645

**GURIWAL ABORIGINAL CORPORATION**  
02 9311 2999

**LA PEROUSE LOCAL ABORIGINAL LAND COUNCIL**  
02 9311 4282

**ODYSSEY HOUSE**  
1800 397 739

**LANGTON CENTRE**  
02 9332 8777

**REDFERN ABORIGINAL MEDICAL & DENTAL SERVICE (AMS)**  
02 9319 5823

**REDFERN AMS AFTER HOURS SERVICE**  
02 8724 6300  
(must be registered patient of AMS)

**CANCER COUNCIL NSW**  
13 11 20

**QUITLINE (SMOKING)**  
13 78 48

**LIFELINE 24HR HELPLINE**  
13 11 14

**GAMBLING ANON**  
02 9564 1574

**METROPOLITAN LOCAL ABORIGINAL LAND COUNCIL**  
02 8394 9666

**KIDS HELP LINE**  
1800 55 18 00

**MENSLINE AUSTRALIA**  
1300 78 99 78

**13SICK NATIONAL HOME DOCTOR SERVICE**  
(after hours support)  
13 74 75

**MENTAL HEALTH LINE**  
1800 011 511

**DOMESTIC VIOLENCE AND SEXUAL ASSAULT HELPLINE**  
1800 200 526

**ST GEORGE HOSPITAL**  
02 9113 1111

**SUTHERLAND HOSPITAL**  
02 9540 7111

**KURRANULLA ABORIGINAL CORPORATION**  
02 9528 0287

## Contact Central and Eastern Sydney PHN

Central and Eastern Sydney PHN is a business unit of EIS Health Ltd  
ABN 68 603 815 818

Tower A, Level 5, 201 Coward St  
Mascot NSW 2020

**Ph:** 1300 986 991

**Fax:** 1300 110 917

**Email:** [info@cesphn.com.au](mailto:info@cesphn.com.au)

**Web:** [www.cesphn.org.au](http://www.cesphn.org.au)

Please mark any correspondence in relation to this publication for the attention of the CESPHN Aboriginal Health Team



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CENTRAL AND  
EASTERN SYDNEY

An Australian Government Initiative