



# South Australian Aboriginal Health Partnership (SAAHP)

## Evaluation of the 2005-2010 Framework Agreement

### Executive Summary

The South Australian Aboriginal Health Partnership (SAAHP) was first created in 1996 to provide an overarching framework and impetus for cross-sector strategic planning, and cooperative and collaborative action in improving equity in Aboriginal health and wellbeing and health outcomes. It is currently mid-way through its 3<sup>rd</sup> Framework Agreement, which has a five year life span through to June 2010. The current SAAHP members are the Australian Government Department of Health and Ageing (DoHA), the SA Department of Health (DH), and the Aboriginal Health Council of South Australia (AHCSA) – the peak body for the Aboriginal community controlled health sector in the state.

A requirement of the 3<sup>rd</sup> Framework Agreement was to evaluate SAAHP's progress mid-way through the agreement. The evaluation provides an opportunity to take stock of SAAHP's achievements and struggles, and identify new pathways that assist it to realise its potential under the current agreement and prepare for a possible 4<sup>th</sup> Framework Agreement. The central components of the evaluation were to:

- evaluate the degree to which the South Australian Aboriginal Health Partnership has achieved the outcomes listed in the Framework Agreement signed in November 2005
- evaluate the strengths and weaknesses of collaboration and cooperation between the partner organisations in the South Australian Aboriginal Health Partnership, and to make recommendations to enhance these qualities
- consider the key documents that SAAHP has produced during this period
- make other general recommendations to enhance the work of the South Australian Aboriginal Health Partnership.

#### Evaluation participants and activities

The evaluation was designed in collaboration with SAAHP Executive and Management. This involved identifying the priority stakeholder groups, the recommended participants from these groups, and the processes by which information would be gained. The stakeholders that participated in evaluation consultations, included the:

- leadership and senior staff or Board members of the three partners
- senior staff of all SA Health regions, other key health and wellbeing organisations, or coordinating groups/divisions for Aboriginal business within the SA Government
- senior representatives from partners to Framework Agreements in other states and territories
- CEOs and staff of Aboriginal health services from metropolitan and rural areas of the state.

#### Key Findings

SAAHP is perceived as a crucial structure and forum at both a symbolic and practical level for the partners to demonstrate shared commitment and a willingness to work together to improve Aboriginal health outcomes. Through the Coordination and Support Team (CST or Secretariat) it facilitates communication and information, and has the capacity to coordinate mutual efforts. SAAHP documents, such as the *Aboriginal Health - Everybody's Business: Knowing the business – South Australian Health Indicators 2005* resource, are highly valued. Stakeholders have used it to guide and support evidence-informed service planning, design and delivery, but would like it to be regularly updated so it remains relevant.

The Partnership has survived significant change in the health landscape since 2006 at both a national and state level, as well as within SAAHP, and is in the process of rebuilding its focus, direction and operation. A major change has been the greater prominence that COAG, the Council of Australian Governments, has gained since 2008, and the impact of its process and short timeframes. This presents an important opportunity for SAAHP as it reviews and redesigns how it operates. To be a relevant and effective participant in the COAG process, while addressing the shared outcomes in the Framework Agreement.

Stakeholders were clear that the full potential of SAAHP is yet to be realised, and in most instances were prepared to support change that enabled this to occur. There is strong interest in SAAHP focusing its efforts on taking a clearer strategic position in directing activity focused on improving Aboriginal health outcomes, including in relation to COAG.

### **Taking the next steps**

There is strong consensus that SAAHP has the potential to be a key player for SA in implementing a better approach to improving Aboriginal health and wellbeing to 'close the gap'. The 3rd Framework Agreement provided a clear statement of intent to guide a joined-up approach to state level strategy and action. The challenge for SAAHP has been in translating strategic intent into meaningful action with transparency and multi-layered accountability.

There is no change without risk. SAAHP is in a position to establish strategic frameworks for systemic action, performance measurement, monitoring and review that are broad enough to allow local level flexibility and autonomy for implementation. Further, there will be no sustainable change unless Aboriginal communities have power and responsibility to make decisions and take action based on their identified priorities. Future orientation, combined with high levels of trust and maturity, are essential for the Partnership to ensure that cross-sector integrated approaches to improving Aboriginal health and wellbeing outcomes are supported and sustainable.

### **Recommendations**

The evaluation identified several recommendations that will assist SAAHP to strengthen its operation, progress the agenda of the 3rd Framework Agreement, and prepare for a possible 4th Framework Agreement.

**Recommendation 1:** SAAHP strengthen its strategic capacity by becoming a more effective coordinating partnership – SAAHP needs to:

- create a joint partner consultation process across the state with key stakeholders on a regular basis through an annual statewide workshop to identify priority issues
- provide regular feedback to key stakeholders on its progress in addressing identified priority issues through a formal communication strategy and the annual statewide workshop so there is a formal cycle of consultation, feedback and accountability
- redevelop its action plan by cross-mapping the strategic/business plans of DoHA State Office, DH and AHCSA to identify synergies for shared priorities and areas of work, assist the partners to minimise duplication or agree on what aspect of an area is the responsibility of the respective partners to address or implement; the action plan would also be informed by the consultation process and CEO network information
- monitor the implementation of agreed actions that address the identified and endorsed priorities from the joint consultation and action planning process

**Recommendation 2:** SAAHP establish the required additional mechanisms to better position itself within the SA health sector and realise its potential through any future Framework Agreement. SAAHP needs to:

- create a SAAHP strategic plan and develop annual action plans to influence and drive Aboriginal health business in South Australia that outlines the respective responsibilities of each partner and other agencies or organisations involved in delivering on the agreed outcomes
- provide recommendations for how funding for Aboriginal health could be prioritised and allocated across the state to best improve health outcomes for Aboriginal people.

**Recommendation 3:** Expand the membership of SAAHP Executive and Management, regardless of which model of partnership SAAHP chooses to implement:

- SAAHP Executive needs to actively engage the CEO of SA Health as the SA Minister of Health's representative - this also matches the level of seniority of OATSIH and AHCSA representatives at Executive
- SAAHP Management needs to ensure it engages with:
  - senior managers who are responsible for driving Aboriginal health in each of the four SA Health regions
  - Aboriginal Affairs and Reconciliation Division (AARD) of the SA Department of Premier and Cabinet

**Recommendation 4:** SAAHP provide an update on its activities to all stakeholders to clearly explain that:

- the partnership between the members is 'SAAHP' and that the CST enables the work of SAAHP to be carried out, i.e. as a Secretariat
- the work of the CST is determined by SAAHP Executive and co-implemented and monitored by SAAHP Management.

**Recommendation 5:** SAAHP create a formal communication strategy that would include the following features:

- an independent website presence with links between this website and the individual partner websites
- provide regular items and updates to partner organisations internal & external publications on the activities of SAAHP and the CST

**Recommendation 6:** Regardless of its location, DoHA and DH continue to resource the CST:

- for the same length of time, i.e. the remainder of the existing 3rd Framework Agreement and the full length of any future Framework Agreement
- sufficiently to meet the needs of the Executive Action Plan(s)

**Recommendation 7:** Explore options for sourcing 'project funds' to support agreed SAAHP activities.

**Recommendation 8:** SAAHP partners undertake an annual assessment of the Partnership from their perspective to use as a basis for joint discussion and decision.