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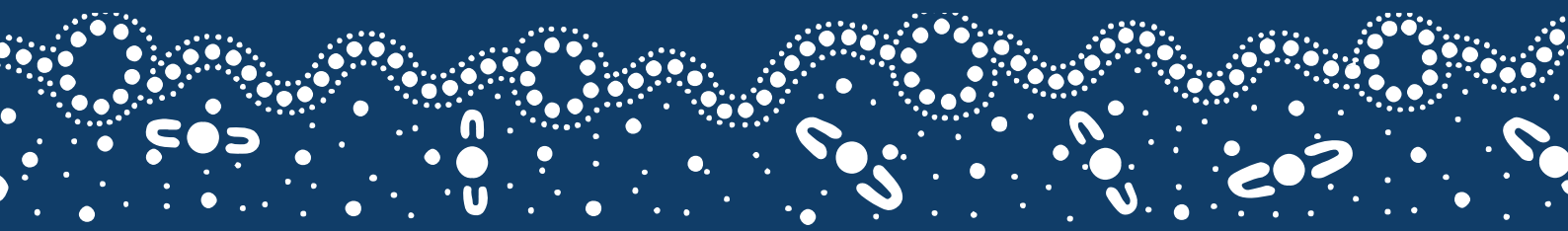
An Australian Government Initiative



Western NSW Primary Health Network

# Cultural Safety Framework

## Part 1



Western Health Alliance Ltd (WHAL)

# **A Transition to Cultural Safety in Service Delivery**

## **WHAL Culturally Safe Practice Framework**

### **Part 1: Framework**

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# A Transition to Cultural Safety in Service Delivery

Improving the health of Aboriginal and Torres Strait Islander peoples is one of Australia's highest health priorities. In acknowledgment of this National priority, the Western New South Wales Primary Health Network (WNSW PHN) is committed to improving health outcomes for Aboriginal and Torres Strait Islander peoples and communities within the WNSW PHN boundaries and beyond.

Through the vision of Supporting, Strengthening and Shaping world class, person-centred primary health, WNSW PHN has established to work in partnership to improve Aboriginal and Torres Strait Islander health outcomes as its first Strategic Goal. WNSW PHN acknowledges the focus of COAG's Closing the Gap report and the Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023 and aims explicitly to embed a related focus within business and work activity across the WNSW PHN region.

A Transition to Cultural Safety in Service Delivery, a WNSW PHN Framework was instituted both as part of the National agenda and the WNSW PHN Aboriginal Health Council's goal of regional commitment to improve Indigenous equality.

## **Context**

*WNSW PHN acknowledge Aboriginal and Torres Strait Islander people as the Traditional Custodians of this country and its waters. Our staff wish to pay their respect to Elders past and present and extend recognition to all Aboriginal people reading this message. We commit to working in collaboration with our region's Aboriginal communities and peoples to improve their health, emotional and social wellbeing in the spirit of partnership.*

*Please note that the term 'Aboriginal' had been used in this Framework, in preference to 'Aboriginal and Torres Strait Islander', in recognition that Aboriginal people are the original inhabitants of the WNSW PHN's region. However, it is important to recognise the fundamental necessity of the provision of culturally safe primary health care both to Aboriginal peoples and to Torres Strait Islander people.*

Western Health Alliance Limited (WHAL) acknowledges with respect external material that has informed the content of A Transition to Cultural Safety in Service Delivery: A Western NSW Primary Health Network Framework; most specifically:

*Indigenous Allied Health Australia (IAHA) in developing Cultural Responsiveness in Action: An IAHA Framework. We would like to express our gratitude to IAHA for sharing the Framework with us and allowing us to adopt a six Key Capabilities model to our specific context as the basis for development of the six pillars documented in this Framework;*

*The Australian Health Ministers Advisory Council Aboriginal and Torres Strait Islanders Health Standing committee in developing the National Cultural Respect Framework 2016-2026 for Aboriginal and Torres Strait Islander Health: A National Approach to Building a Culturally Respectful Health System, available from the NACCHO webpage, at*

<https://nacchocommunique.com/2016/12/14/naccho-aboriginal-health-launch-of-the-national-cultural-respect-framework-for-aboriginal-health-2016-2026/>

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## 1. Introduction

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### 1.1 Purpose

This Framework is to define the Cultural Safety requirements for Western NSW Primary Health Network (WNSW PHN) to ensure that:

- The services commissioned by WNSW PHN are culturally safe, effective, appropriate, consumer focused, accessible and efficient;
- High quality primary health care programs and services are developed to provide culturally safe and effective care by ensuring commissioned providers have an overarching cultural safety framework for the programs and services they deliver, especially to Aboriginal people and communities within the WNSW PHN region;
- The WNSW PHN business principles around cultural safety are clearly set out and communicated to our organisation members, partners and key stakeholders, including; the WNSW PHN's five advisory Councils, two Local Health Districts, Aboriginal health services (Aboriginal Community Controlled Health Organisations and Aboriginal Medical Services) and primary health care providers;
- There is an established framework that enables WNSW PHN to meet its legal and ethical responsibilities; for the provision of culturally safe programs and services provided by staff, contractors and sub-contractors in accordance with the WNSW PHN Cultural Safety Framework.
- Cultural safety is effectively facilitated across the WNSW PHN's activities, consistent with the Strategic Plan (refer to Table 1 for a summary of the WNSW PHN Strategic Goals).

**Table 1: A Summary of WNSW PHN Strategic Plan Goals**

<b>Goal 1</b>	Work in partnership to improve Aboriginal and Torres Strait Islander health outcomes
<b>Goal 2</b>	Improve health outcomes through service integration
<b>Goal 3</b>	Develop high quality primary health care programs and services
<b>Goal 4</b>	Support the development of a sustainable primary health workforce
<b>Goal 5</b>	Ensure a sustainable and accountable organisation

The Cultural Safety Framework is intended to guide how cultural safety, risk management and performance is planned, measured and reported to the satisfaction of the Board of Directors, Chief Executive Officer, and associated Councils.

This Framework outlines three (3) key functions for the organisation:

- Requirements for commissioning clinical services; and
- Systematically supporting the primary care sector, in particular general practice
- Actualising WNSW PHN commitment to support frontline health services by increasing the efficiency and effectiveness of primary health care, ensuring people receive the right care in the right place at the right time.

A Cultural Safety Framework will support WNSW PHN's ability to develop and maintain strong networks with and connections to Aboriginal and Torres Strait Islander communities.

## **1.2 Background**

Primary Health Networks (PHNs) have been established with the key objectives of increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes, and improving coordination of care to ensure patients receive the right care in the right place at the right time.

Consistent with the Commonwealth's PHN Guidelines, and the statistics that place the health of Aboriginal Australians well below that of non-Aboriginal Australians, the WNSW PHN is expected to:

- Have an influential role in the primary care sector (in particular general practice). It is intended that this will be achieved through:
  - Supporting attainment of the highest standards in safety and quality including cultural competence
  - Showcasing and disseminating research and evidence of best practice to improve outcomes for all people and aimed specifically to improve outcomes for Aboriginal Australians
  - Collecting and reporting data to support continuous improvement.
- Act as a regional commissioning agent. The focus is on contracting services that measurably improve health outcomes for local communities relevant to needs. To achieve this, commissioning activities are characterised by ongoing assessment to monitor the quality of services and ensure compliance with relevant contractual standards.

## **1.3 Objectives**

1.3.1 Primary Health Networks are expected to use commissioning to achieve their objectives of:

- Increasing the availability, efficiency and effectiveness of culturally appropriate primary health care services for patients, particularly those at risk of poor health outcomes including, especially within this context, Aboriginal people and communities; and
- Improving coordination of care to ensure patients receive the right care in the right place at the right time.

1.3.2 Primary Health Networks must establish and maintain appropriate Cultural Safety quality assurance arrangements for all components of Commissioning with a particular focus on the services commissioned. Building on the requirements of the PHN Grant Programme Guidelines (1.3 PHN Governance Arrangements) this must include:

- Ensuring a high-quality standard of culturally appropriate service delivery which is supported by appropriate Culturally Safe quality assurance processes;
- Ensuring the workforce is applying Culturally Safe practice within their area of qualification and competence;
- Ensuring appropriate risk assessment and management procedures are in place;
- Establishing and maintaining appropriate and culturally safe consumer feedback procedures, including complaint handling procedures;
- Ensuring appropriate cultural support mechanisms are in place for patients

#### **1.4 Scope**

WNSW PHN commits to supporting the Australian Government vision for Aboriginal health and wellbeing equity as stated in the National Aboriginal and Torres Strait Islander Health Plan, 2013-2023:

*The Australian Health System is free of racism and inequality and all Aboriginal and Torres Strait Islander peoples have access to health services that are effective, high quality, appropriate and affordable. Together with strategies to address social inequalities and determinants of health, this provides the necessary platform to realise health equity by 2031*

The scope of prioritised activities that actively require mechanisms for Cultural Safety are articulated in a range of approved Activity Work Plans and associated documents. Table 2 lists the WNSW PHN's current range of priority areas within its plans.

**Table 2: A Summary of WNSW PHN Priority Areas**

<ul style="list-style-type: none"><li>• Aboriginal Health</li><li>• Chronic and Complex Care</li><li>• Older Persons' Care</li><li>• Maternal and Child Health</li><li>• Mental Health &amp; Substance Abuse</li><li>• Risk Factors / Prevention</li><li>• Workforce</li><li>• Access to Services</li><li>• Coordination Integration Collaboration</li></ul>
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## 2. Roles and Responsibilities

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The WNSW PHN Executive and Senior Management consider cultural safety and implications in their decision-making processes as informed by key stakeholders including the advisory Clinical, Community and Aboriginal Health Councils.

This is reflected in the WNSW PHN Towards a Healthier 2021 Strategic Plan:

- Goal 1: Work in partnership to improve Aboriginal and Torres Strait Islander health outcomes - Strategy 1.3: Support culturally safe models of care and programs.

### 2.1 *Board of Directors*

The governance of Cultural Safety is set within the context of the broader governance role of the WHAL Board. This includes overseeing that appropriate governance structures are in place to lead the Commissioning processes, including needs assessment and service planning.

### 2.2 *WNSW PHN Aboriginal Health Council*

The Aboriginal Health Council key responsibilities as described in their Terms of Reference include:

- To provide advice to the board on matters relating to Aboriginal health at the State / National levels; including policy, legislation and funding;
- To provide strategic advice to the Board to ensure a culturally aware and competent critique on matters relating to the design and development of services for Aboriginal people;
- To support the WNSW PHN in efforts to assist the rapid uptake and adoption of best practice models of care to support Aboriginal communities with better access, utilisation and engagement with mainstream provider networks and services;
- To assist the scale and spread of innovation and leadership throughout the Aboriginal Community Controlled Health Organisations ACCHOs organisations and regional networks and improve the durability and performance of ACCHOs networks;
- To assist the design and cultural appropriateness and sensitivity of mainstream Commissioning products and models of care;
- To support the Board to leverage, plan and attract additional resources, programs and funding opportunities to be applied through participating ACCHOs networks within the catchment;
- To assist in identifying gaps, barriers, strengths and opportunities for improvement in the provision of primary health care to Aboriginal Communities in the localities of the WNSW PHN;
- To enable two-way exchange of information about primary health care between WNSW PHN Board, Management and ACCHOs;
- To provide an Aboriginal consumer and community based service provider perspective in the review of areas linked to Commissioning models of care, and other redesign issues undergoing significant change.

### 2.3 *Chief Executive Officer*

Provides the organisational framework for effective Cultural Safety governance.

## **2.4 Executive**

WNSW PHN Executive have a responsibility to plan, review and integrate governance systems that promote cultural safety within WNSW PHN work practice. The Executive will clearly articulate organisational and individual accountabilities for cultural safety throughout the PHN.

## **2.5 Management**

WNSW PHN Management have responsibility for implementing and maintaining systems, materials, education and training that ensure safe, effective and reliable delivery of culturally safe health care activities.

## **2.6 WNSW PHN Staff**

Under the guidance of the Executive and Management, WNSW PHN staff are required to adhere to the WNSW PHN Cultural Safety Framework as it applies to their respective role function and responsibility.

## **2.7 Commissioned Providers**

- Commissioned providers will develop an organisational governance framework that conforms to WNSW PHN Cultural Safety Framework
- If the Provider sub-contracts services (on the agreement of WNSW PHN), processes for sub-contracting should meet appropriate Cultural Safety standards.

Commissioned providers will:

- Provide to WNSW PHN Procurement Coordinator, with evidence, that best practice Cultural Safety policies and procedures are in place, including supporting evidence that clinicians are appropriately credentialed to deliver Culturally Safe commissioned services;
- Provide information as requested by the WNSW PHN Service Development and Performance Team and the Procurement Coordinator.

## **3. Cultural Safety Framework Definition**

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### **3.1 What is Culturally Safe and Responsive Health Care?**

Working in a culturally safe and responsive way is about strength-based, action-oriented approaches to achieving cultural safety, that can facilitate increased access to affordable, available, appropriate and acceptable health care.

WNSW PHN defines Cultural Safety in the context of a model developed in the Indigenous health care context in Aotearoa, New Zealand. This model delivers patient-centred care that extends beyond cultural awareness and cultural sensitivity and it is increasingly being used in the Australian primary health care setting.

The cultural safety model focuses on the safety felt by individuals, their families and their communities in seeking health care. It aims to maximise safety through recognising and protecting the patient's cultural identity and by addressing power imbalances in the

therapeutic relationship which have the potential to be detrimental to the patient's health and wellbeing. Whether primary health care provision is culturally safe is defined by the patient, his or her family and community.

*“Cultural safety means an environment which is spiritually, socially and emotionally safe, as well as physically safe for people; where there is no assault, challenge or denial of their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience, of learning together with dignity and truly listening.” – Williams, R. (1999). Cultural safety – what does it mean for our work practice?*

***Australian and New Zealand Journal of Public Health, 23(2), 213-214***

*In the context of health care, cultural safety can be seen as the effective care of a person/family from another culture by a health care provider who has undertaken a process of reflection on their own cultural identity and recognises the impact of the health care professional's culture on their practice. Unsafe cultural practice is any action which diminishes, demeans or disempowers the cultural identity and well-being of an individual. – The Nursing Council of New Zealand, Guidelines for Cultural Safety, the Treaty of Waitangi and Maori Health (2002)*

Cultural safety places the onus on the health service provider to understand his or her own culture and identity, and the personal and professional cultural values which shape his or her approach to practice, and how this impacts on the care provided and on the relationship with the patient.

The health service provider requires a competent, locally specific understanding of the ongoing effects of colonisation, racism and dispossession on the health of Aboriginal patients, families and communities. They also require an appreciation of the strengths, values, knowledges and norms inherent in Aboriginal society and culture and the potential for these to contribute to improving the health status of Aboriginal people if embraced in the primary health care context. Cultural safety is dependent upon the ability of the patient, family and community to engage in shaping service models and delivery.

## **4. Key Elements**

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### **4.1 Transition to Cultural Safety in Service Delivery**

Western NSW PHN has a leadership role in transitioning the primary health care system through the development of culturally safe models of care to ensure access to quality health care and wellbeing programs by Aboriginal peoples within the WNSW PHN region. The Cultural Safety Framework underpins this role.

The Framework provides information and support to prepare primary health care service providers to engage in a transition towards cultural safety. It enables all service providers in the region to positively influence the health and wellbeing, quality of life, future aspirations and prosperity of Aboriginal individuals, families and communities.

To assist in conceptualising the transition towards Cultural Safety, WNSW PHN envisages a process incorporating three staging points identified in a stepwise process of personal, professional and organisational development. These three steps, derived from the pioneering work of Dr Irihapeti Ramsden in Aotearoa, New Zealand, exist as points along a continuum on which primary health care service providers can plot progress in their transformation towards cultural safety. Figure 1 illustrates the continuum together with descriptors for each step.



#### **4.2 Implementation of Transition to Cultural Safety**

WNSW PHN has articulated six Standards for Key Culturally Safe Performance Appraisal. WNSW PHN is progressively implementing a process which will culminate in a requirement for all primary health care providers to become formally accredited in cultural safety in order to access primary health care funding for Aboriginal communities.

Whilst there is no formal accreditation process, self-accreditation will require demonstration of attainments against each of the six Standards. An Evaluation Tool and User Guide that form essential appendices to this framework have been developed to underpin the process.

The stages in this process include the following:

1. Service providers will initially use the Evaluation Tool to self-assess their attainments against each of the six Standards as evidence for transformation towards cultural safety with a view to identifying where they are situated prior to commissioning on the cultural safety continuum and to plan for transformation;
2. Service providers will then lodge the completed Evaluation Tool, together with supporting evidence, where relevant, as outlined in the Evaluation Tool Users' Guide, in responding to WNSW PHN's requests for proposals to demonstrate that a process of transformation towards cultural safety has been initiated and to identify the point on the continuum for each standard at which the service provider sees itself;

3. Key Performance Indicators (KPIs) relating to the transformation towards cultural safety will be documented in each service provider's contract, and service providers will be required to report against these KPIs;
4. The WNSW PHN will begin to apply the Evaluation Tool to assess the cultural safety of tenderers for the provision of primary health care and related services in the context of its Commissioning Framework in subsequent rounds of commissioning;
5. When the WNSW PHN considers sufficient time has elapsed for commissioned service providers to transition to an acceptable level of cultural safety, organisations proposing to provide primary health care services will be required to demonstrate formal accreditation in cultural safety as a mandatory element in the Commissioning Framework. Factors influencing this requirement will be context-specific and may include the scale of the service provider, the nature of services commissioned and the social, cultural and geographical contexts of the target population.

### **4.3 Capabilities and Standards**

The six Standards for Key Culturally Safe Performance Appraisal address six aspects of organisations: culture, models of care, workplaces, policies and procedures, community engagement practices and employment practices. The Standards address the attributes and attainments of organisations. However, progress against the Standards is highly dependent on the organisations' support for their staff in individually attaining Cultural Safety. The WNSW PHN anticipates that attainments against each of the Standards will be progressive over time; this is elaborated further in the Cultural Safety Appendix A: Cultural Safety Evaluation Tool Users' Guide with Self-Assessment Tool and FAQ

#### **Standard 1: Culturally safe and responsive clinical culture**

This requires evidence that clinical practice is culturally responsive and supported by culturally based clinical supervision aimed at the continuous improvement and adaptation of clinical practice in services provided to Aboriginal people.

#### **Standard 2: Culturally responsive models of care**

Demonstration that all models of care have been culturally validated and promote a culturally safe service planning and delivery framework for services to Aboriginal people.

#### **Standard 3: Culturally safe Workplace**

This requires evidence that workplace practices and workplace design create an environment that supports and responds to the cultural safety of Aboriginal people receiving services, and where all service providers can develop and deliver culturally responsive services.

#### **Standard 4: Policy and procedure cultural audit**

This requires evidence of a continual cultural audit of and cultural adaptation in the use of all policies and procedures where these policies or procedures affect the delivery of primary health care services to Aboriginal people.

### **Standard 5: Cultural community engagement**

This requires evidence that the appropriate Aboriginal communities are actively involved in consultation, service design and service delivery planning. In addition, evidence of continual proactive dialogue with the appropriate local Aboriginal communities will be required as it relates to the delivery of individual clinical interventions.

### **Standard 6: Cultural workforce planning and management.**

This requires evidence that affirmative action workforce planning and implementation strategies are in place to support and foster the increased participation of Aboriginal people in the health workforce. This includes culturally adaptive supervisions and workplace performance appraisals.

#### **4.4 Key Element Appendix**

Appendix A: Cultural Safety Evaluation Tool Users' Guide with Self-Assessment Tool and FAQ.

- i. The key element appendix provides information and support to prepare primary health care service providers to engage in transformation towards cultural safety so that all service providers in the region can positively influence the health and wellbeing, quality of life, future aspirations and prosperity of Aboriginal individuals, families and communities.
- ii. Information contained within appendices forms essential material for health service providers in response to WNSW PHN's service provision and commissioning processes.

## **5. Cultural Safety Commissioning Principles**

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Commissioning is most effective in achieving the best outcomes when partners work to a set of common values and principles. The key Cultural Safety values for WNSW PHN are to provide culturally safe services that are:

- accessible, timely, affordable and effective.
- Patient-centred and based on population health needs
- well integrated, coordinated and provide continuity of care, particularly for those with multiple ongoing and complex conditions
- safe, and of a high quality and which are underpinned by relevant research and innovation.
- efficient and cost effective in order to ensure fiscal sustainability.

Whilst the priority may differ from service to service, it is important that the following principles and criteria clearly inform Cultural Safe commissioning decisions and service development:

- i. Clear alignment with the WNSW PHN Strategic Plan and/or the region's health priorities, the WNSW PHN operational budget and the PHN Grant Programme Guidelines.
- ii. Initiatives must strive to achieve best value for money and support long term sustainability.

- iii. Investment will be targeted at the most appropriate services and clinical interventions and innovative models of care.
- iv. Emphasis will be placed on developing Culturally Safe good quality services and continually improving clinical quality, outcomes and experience for service users.
- v. Emphasis will be placed on improving access and patient choice most especially for Aboriginal people.
- vi. Emphasis will be placed on developing integrated services and improving integration, coordination and continuity of care.
- vii. Decision making will be evidence based, open and transparent.
- viii. Service development is Culturally Safe patient-centred and engages local communities in planning and decision making to ensure our strategies meet local needs and priorities.
- ix. Enable feedback in order to review effectiveness of the commissioning process in meeting Cultural Safety and local needs.
- x. Continuous monitoring of performance and evaluation of current and developing services to ensure that they represent Cultural Safety best practice as outlined in national guidance, and have a clear impact on outcomes.

## **6. Part 2 - Cultural Safety Evaluation Tool User Guide**

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The User's Guide to the Cultural Safety Evaluation Tool has been prepared to complement this document.

For further information, please refer to: **Part 2: Cultural Safety Evaluation Tool User Guide with Self Assessment Tool and FAQs.**

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Western Health Alliance Ltd (WHAL), trading as the Western NSW Primary Health Network (WNSW PHN) is one of 31 Primary Health Networks across Australia, established by the Australian Government to support and strengthen general practice, Aboriginal health services, allied health professionals and other health professionals working in primary health care.



We acknowledge that we work on the traditional lands of many Aboriginal clans, tribes and nations. We commit to working in collaboration with our region's Aboriginal communities and peoples to improve their health, emotional and social wellbeing in the spirit of partnership.

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