

Western Sydney Aboriginal Health Toolkit

The aim of the Western Sydney Aboriginal Health Toolkit is to provide health professionals caring for Aboriginal and Torres Strait Islander people in Western Sydney with practical tools and resources that support improved patient care and better practice outcomes.



Acknowledgement of Country

On behalf of the WentWest - Western Sydney Primary Health Network, Board of Directors, the Executive, and our staff, we acknowledge the Dharug peoples as the Traditional Custodians of the lands across our region that we gather and work upon. We pay our respects to all Elders past, present, our emerging youth and to all Aboriginal and Torres Strait Islander peoples across Dharug country and our nation. We celebrate their continuing culture and acknowledge the memory of their ancestors.

ARTWORK BY MIA JACKSON 2017

Mia Jackson is a Wiradjuri woman from Peak Hill, Dubbo, who lives with her family in western Sydney. Mia's artwork is inspired by mums and bubs and healthy families. This particular piece is titled 'Healthy Aboriginal Families' and is a 50cm x 40cm acrylic on canvas painting. The circles over the top of the artwork represent meeting and coming together. The hands represent Aboriginal people and children. The centre circles and dots represent song-lines of all our Elders past and present, the paths on which they travelled and the stories that they told. The families represent each and every one of us.

Warami!
(hello in Dharug language)

Western Sydney is home to a large and diverse urban Aboriginal and Torres Strait Islander community. WentWest is committed to supporting their health and wellbeing through our [Reconciliation Action Plan](#), the [NSW Aboriginal Health Plan 2024-34](#) all focused on delivering culturally safe, respectful and responsive care.

We are proud to present Western Sydney PHN's Aboriginal Health Toolkit, reflecting our commitment to respectful relationships and improved health outcomes for Aboriginal and Torres Strait Islander peoples.



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This Toolkit brings together practical information to help service providers review current practices, strengthen cultural understanding and implement effective strategies.

Flexible and suitable for whole organisations or specific programs, it supports staff at all levels through modules on engaged leadership, patient engagement, data-driven improvement and team-based approach. Its purpose is to promote consistent, culturally informed practice and reduce barriers to care for Indigenous communities across Western Sydney (Dharug Country).

Practice Readiness Checklist

Engaged Leadership – preparing your practice	Completed
Whole practice is committed to providing culturally safe care and ongoing cultural learning.	<input type="checkbox"/>
Create a welcoming environment (i.e. artwork, flags, Acknowledgement of Country, posters etc.).	<input type="checkbox"/>
Practice is accredited and registered for PIP Indigenous Health Incentive (PIP-IHI) via HPOS or PIP form	<input type="checkbox"/>
For PIP-IHI, at least two staff members completed approved Cultural Awareness Training (One MUST be a GP and one other staff member)	<input type="checkbox"/>
All relevant staff (GPs, nurses, reception) have PRODA and know how to use HPOS for checking registration status for PIP-IHI, Close The Gap (CTG) and MBS eligibility.	<input type="checkbox"/>
Meet all PIP-IHI requirements to receive the maximum incentive payments	<input type="checkbox"/>

Patient Registration and Engagement	Completed
Brochures and identification posters available in waiting room to encourage self-identification of Aboriginal and/or Torres Strait Islander origin patients Posters accessible via 715 Health Check: Department of Health, Disability and Ageing or email support@wentwest.com.au	
All staff feel confident asking “Are you of Aboriginal or Torres Strait Islander origin?” Complete the AIHW training tool for Indigenous identification	<input type="checkbox"/>
All staff routinely records (i.e. new patient forms) and audits Aboriginal and/or Torres Strait Islander ethnicity status in clinical software.	<input type="checkbox"/>
Offer all Aboriginal and Torres Strait Islander patients an 715 health assessment (face-to-face or telehealth, claimable every 9 months), ensuring consent is obtained and a copy is provided to the patient.	<input type="checkbox"/>
Once a 715 Health Assessment is completed, the patient becomes eligible for up to 10 practice nurse follow-up services (item 10987) per calendar year.	<input type="checkbox"/>
Patients with chronic conditions may co-claim a 715 with Chronic Condition Plans and Reviews (965/967) when clinically appropriate.	<input type="checkbox"/>
PIP-IHI - Register eligible patients if they: <ul style="list-style-type: none"> <input type="checkbox"/> self-identified Aboriginal and/or Torres Strait Islander have a current Medicare card <input type="checkbox"/> nominated the practice as their ‘usual care provider’ <input type="checkbox"/> have a chronic condition or a mental disorder <input type="checkbox"/> complete the PIP-IHI registration and consent form (once in a lifetime) <input type="checkbox"/> have had or have been offered an 715 health assessment 	<input type="checkbox"/>
Discuss, signed consent and register the patient through HPOS > My programs > PIP	
Maintain a list of PIP-IHI registered patients	
Closing the Gap PBS co-payment – Register eligible patients if they:- <ul style="list-style-type: none"> <input type="checkbox"/> self-identified Aboriginal and/or Torres Strait Islander have a current Medicare card <input type="checkbox"/> setbacks in preventing or managing their condition if they don’t take the medicine <input type="checkbox"/> unlikely to keep up their treatment without help with the cost. 	<input type="checkbox"/>
Discuss, verbal consent and register the patient through HPOS > My programs > Closing the Gap PBS Co-Payment	
Practice participates in or promotes key events (e.g. NAIDOC Week, National Reconciliation Week).	<input type="checkbox"/>

Data-Driven Improvements	Completed
Change Idea: Number of patients who have their Aboriginal and Torres Strait Islander status recorded RACGP Standards for General Practice (5th ed.) – Indicator QI 2.1B	
Change Idea: Number of eligible patients who have a 715 Aboriginal Health Assessment (every 9m)	
Change Idea: Number of Aboriginal and Torres Strait Islander patients being followed up by our practice nurse or Aboriginal Health Practitioner after a 715 Health Assessment	
Change Idea: Number of patients referred to allied health services following 715 MBS item number	
Change Idea: Number of Care plans and Reviews for Aboriginal and Torres Strait Islander patients	
Change Idea: Number of Mental health treatment plans for Aboriginal and Torres Strait Islander patients	
Change Idea: Number of patients registered for PBS co-payment measure for chronic patients or at risk	
Change Idea: Number of Aboriginal and Torres Strait Islander patients referred to the Integrated Team Care (ITC)	
Use CAT4 or data audit system to create a register for Aboriginal and/or Torres Strait Islander patients aged 15 years with or without chronic conditions and mental health condition	
Download from HPOS a list of patients registered for the PIP-IHI at the practice during the quarter and monitor outcomes.	
Recall/reminder systems (i.e. GoShare) are in place for: <ul style="list-style-type: none"> <input type="checkbox"/> 715 health checks (every 9 months) <input type="checkbox"/> GPCCMP / MHTP (annually) <input type="checkbox"/> GPCCMP / MHTP reviews (quarterly - if clinically appropriate) <input type="checkbox"/> Follow-up visits (e.g. item 10987 - 10 per year). <input type="checkbox"/> Preventive health (i.e. immunisation, heart health checks, cancer screening) 	

Team-based Care	Completed
Clinicians use HealthPathways for clinical guidelines, assessment, management and referral information and patient information for Aboriginal and/or Torres Strait Islander patients	
Clinicians use National Guide to preventive healthcare for Aboriginal and Torres Strait Islander	
Consider referring patients to Integrated Team Care (ITC) , especially those with chronic conditions or who would benefit from care coordination, medical devices, transport, or other health services.	
Consider referring the patient to the Greater Western Aboriginal Health Service (GWAHS) , which provides culturally appropriate care and valuable community programs.	
First Nations Australians only need to have either a GPCCMP or a health assessment to access up to 10 allied health services per calendar year . There will be no requirement to have both services.	
Do practice referral letters to specialists indicate CTG PBS co-payment registration and a prompt that prescriptions for patients referred from the practice can be CTG annotated.	
Utilise principles for producing best possible medicines list for Aboriginal and Torres Strait Islander people .	
Staff know local Aboriginal support services and Outreach Workers and maintain links with community/elders for culturally appropriate care. visit WentWest Aboriginal health webpage .	

WentWest Enablers



[2kg Challenge](#)



[GoShare](#)



[HealthPathways](#)

Patient Journey and Practice workflow

RACGP and NACCHO's Five Steps provide a simple starting point for delivering culturally responsive Aboriginal and Torres Strait Islander healthcare, with practical actions aligned to the [Standards for general practice \(5th edition\)](#). Use the [guide](#), [summary sheet](#), and visual [poster](#) to begin.

1 Prepare and register practice for PIP-IHI

- Ensure PRODA set-up and appropriate delegations are set
- Register for the [Indigenous Health PIP Incentive](#)
- Staff complete accredited cultural awareness training
- Create a welcoming practice environment

Module 1: Engaged Leadership

2 Identify your Aboriginal and Torres Strait Islander patients

- Asking the question can cause discomfort in practice staff; evidence shows that all patients are comfortable when asked if the reasons can be explained.
- If patients choose to identify as Aboriginal and/or Torres Strait Islander, they will do so when prompted.
- Visit [RACGP - Identification of Aboriginal and Torres Strait Islander patients in general practice](#)

Module 2: Patient Registration

Module 4: Data-driven Improvements

3 Offer a health assessment (MBS Item 715)

Opens access to an additional 5 allied health visits

- Conducting a health assessment with a patient is an excellent opportunity to build rapport, trust and to develop and enhance an ongoing relationship.
- As well as identifying physical health problems, discussing psychological and social functions is an excellent approach to effective two-way communication with Aboriginal and Torres Strait Islander patients.
- [Department of Health fact sheet on Aboriginal and Torres Strait Islander health assessments](#)

Module 2: Patient Registration

Module 4: Data-driven Improvements

4 Register eligible patients for the PIP and the Closing the Gap PBS co-payment

- Once your practice is registered for the Indigenous PIP (Step 1), you can register patients after seeking written consent using [PIP-IHI registration form](#)
- Also, register patients for [CTG – PBS co-payment in HPOS](#).
- Use the same form as the [PIP patient registration](#).

Module 3: Team-based care

5 Use appropriate clinical guidelines, and programs from the RACGP, Medicare and PHNs to enhance access and quality of care

- The [NACCHO/RACGP National Guide](#) outlines the activities that are effective for preventive health.
- [Indigenous Health Service eLearning program](#).
- For local services, [WentWest Aboriginal Health webpage](#)
- [HealthPathways Western Sydney - Aboriginal and Torres Strait Islander Health](#)

Module 3: Team-based care

Module 4: Data-driven Improvements

Module 1

Engaged Leadership

Cultural Awareness and Safety

For Aboriginal and Torres Strait Islander people, culture is about family networks, Elders and ancestors. It is about relationships, languages, dance, ceremony and heritage. Culture is about spiritual connection to lands and waters. It is the way stories and knowledge are passed on to babies and children, and how they greet each other and look for connection.¹

For Aboriginal and Torres Strait Islander peoples, health is holistic covering physical, social, emotional, cultural and spiritual wellbeing². Many First Nations people face barriers to culturally appropriate care. Services must be culturally safe, not just nearby.

Cultural safety means respecting identity, communicating clearly, involving family when appropriate and supporting shared decisions. Primary health services should create culturally safe environments for Aboriginal and Torres Strait Islander people.³

Your practice plays a key role in supporting cultural safety locally.⁴

The Australian Institute of Health and Welfare's **Cultural Safety in Health Care for Indigenous Australians: Monitoring Framework**

tracks progress across three key areas to improve cultural safety, strengthen access and quality of care, respect culture and address racism.



Culturally respectful health care services



Patient experience of health care



Access to health care services

Cultural Awareness Training Providers

- **RACGP training** \$\$
- **Indigenous Doctors Association** \$\$
- **College of Rural and Remote Medicine** \$\$
- **Arrilla** \$\$
- **Centre for Cultural Competence** \$\$
- **Evolve Communities** \$\$
- **Corporate Culcha** \$\$
- **Mirri Mirri** \$\$
- **University of Sydney**
- **Western Australian Government**
- **Institute of Aboriginal and Torres Strait Islander**

Engage directly with training providers to assess their suitability to your practice needs. For PIP-IHI requirements, visit **PIP Indigenous Health Incentive Guidelines*

Cultural Awareness Training is a recommended component of General Practice Accreditation

Build staff understanding of Indigenous history by using accessible training, community connections, films, books and cultural experiences, helping them recognise barriers, racism and the context needed for culturally safe engagement. For more suggestions see: **Creative Spirits: Movies**.

- The Wailing – A National Black Oral History (Book)
- The Way we Civilise (Book)
- September
- Rabbit Proof Fence
- Ten Canoes
- Black Chicks Talking
- The Fringe Dwellers
- Babakueria
- Nukkan Kungun Yunnan
- Samson and Delilah

¹ Australian Indigenous HealthInfoNet <https://healthinonet.ecu.edu.au/learn/health-topics/social-and-emotional-wellbeing/country-culture-spirituality/>

² Australian Indigenous HealthInfoNet <https://healthinonet.ecu.edu.au/learn/health-topics/social-and-emotional-wellbeing/family-kinship-community/>

³ Australian Institute of Health and Welfare <https://www.aihw.gov.au/reports/indigenous-australians/cultural-safety-health-care-framework/contents/summary>

⁴ Australian Childhood Foundation <https://learn.childhood.org.au/blog/cultural-safety/>

Closing the Gap

Closing the Gap began as a response to the significant inequality in health and wellbeing experiences by Aboriginal and Torres Strait Islander people

It is a call to governments to commit to equality for Aboriginal and Torres Strait Islander people in health and life expectancy within a generation. To address these health inequalities there is a need to:

- strengthen and integrate primary healthcare,
- improve identification of Aboriginal and Torres Strait Islander patients,
- improve resource allocation and health service delivery,
- subsidise medication, and
- provide a well-trained and culturally safe health workforce.

Primary care providers have an important role in Closing the Gap including patient identification, chronic disease prevention and management, and delivery of culturally appropriate care.

Resources

- [HealthInfoNet - Closing the Gap](#)
- [Closing the Gap](#)
- [Close the Gap Campaign](#)
- [HealthPathways Closing the Gap](#)

Did you know?

[Western Sydney Integrated Care Team \(ITC\)](#) can attend appointments with your patient to health specialists and other support services.

ABORIGINAL AND TORRES STRAIT ISLANDER HEALTH - KEY FACTS⁵⁶

- 🧠 Mental health, asthma, arthritis and diabetes are the top health issues for First Nations people in Western Sydney.
- 💔 Nationally, 63% of the total disease burden for Indigenous Australians is caused by chronic disease.
- 💧 Nearly 49% of this burden is preventable by reducing risks such as smoking, alcohol and drug use and obesity.
- 📄 Less than 1 in 4 First Nations active residents completed a 715 Health Assessment in 2023/24.

Social and emotional wellbeing

Multiple culturally oriented programs, services and frameworks have emerged in recent decades to support the social and emotional wellbeing (SEWB) of the Aboriginal and Torres Strait Islander peoples in Australia. Because of this, most Aboriginal and Torres Strait Islander people prefer the term SEWB as it fits well within a holistic view of health. The holistic model is more collective and has connections not evident in the mainstream view of health. The guiding principles that underpin social and emotional wellbeing for Aboriginal peoples.

- Health as Holistic
- The right to Self-determination
- The need for cultural understanding
- The impact of history in trauma and loss
- Recognition of Human Rights
- The impact of Racism
- The impact of Stigma
- Recognition of the centrality of Kinship
- Recognition of cultural diversity
- Recognition of Aboriginal History

CONNECTION TO



For information regarding the Close the Gap PBS Co-Payment, visit [Module 3](#)

⁵ WentWest Needs Assessment 2025 <https://wentwest.com.au/about-us/planning-resources/>

⁶ [Australian Burden of Disease Study 2018](#): key findings for Aboriginal and Torres Strait Islander people

Module 2

Patient Registration & Engagement

Identification

Accurately recording Aboriginal and Torres Strait Islander status ensures patients receive culturally safe care and access to appropriate programs (e.g. 715 health checks, CTG medicines, ITC). It also improves data accuracy, service planning and monitoring of Closing the Gap outcomes. Incorrect or missing identification leads to under-reporting of health needs and poorer access to services⁷.

How to ask respectfully

Ask every patient the standard national question:
“Are you of Aboriginal or Torres Strait Islander origin?”

If the patient asks why:

“We ask this of everyone. It helps us provide the right care and ensures our services meet the needs of all communities.”

Recommendation: Reception staff to undertake [AIHW training tool for Indigenous identification](#)



[Order 'Asking the Question' resource](#)

Key points:

- Ask all patients - not only those you think may identify.
- Never assume, guess or record identification on someone's behalf.
- Respect a person's choice not to identify.
- Parents/guardians may choose to identify their child.
- People are more likely to identify when the service is culturally safe and welcoming.

What to do next

- Display [Identification Poster | WentWest](#)
- Record identification accurately in your clinical software ([BP](#) / [MD](#)).
- Provide information about First Nations health services and programs.
- Ask if they have had their annual **715 Health Assessment**; offer to book one.
- Ensure culturally safe follow-up and recall systems are in place. Consider use of [GoShare](#).
- Discuss [MyMedicare](#) and importance of a usual healthcare provider for continuity of care.

Creating a culturally safe environment

Improving identification relies on a service that feels safe, respectful and welcoming. Key principles:

- Acknowledge Country and know the local Traditional Owners
- Use culturally welcoming signage, forms and spaces
- Train all staff in cultural capability
- Provide flexible access: outreach, co-case management, allowing support persons
- Use visual/oral communication options for low literacy
- Build genuine long-term relationships with local Aboriginal organisations, Elders and community
- Seek feedback from Aboriginal patients and staff

Above all, engagement takes time—trust, respect and genuine listening cannot be rushed.

For further information and resources see; [AIHW Indigenous Identification](#) and, [RACGP Identification of Aboriginal and Torres Strait Islander people in Australian General Practice](#)

⁷ Knight, W., Platow, M. J., Grace, D. M., Tye, O., & Styles, J. (2020). Medical decision making using knowledge of patient identification as Aboriginal or Torres Strait Islander: what do medical students think?. *Australian Indigenous Health Bulletin*, 1(1).

Health Assessment

The **Aboriginal and Torres Strait Islander Health Assessment** (MBS **715** - claimable **once every 9 months**) is a comprehensive physical, psychological and social wellbeing check. It supports early detection, prevention and chronic condition management. If deemed necessary, patients can access;

- **10 follow-up services** (MBS **10987** - provided by a practice nurse or Aboriginal and Torres Strait Islander Health Practitioner. For Bulk Billing Incentive MBS eligibility, visit [Follow-up Services | Services Australia](#))
- **10 allied health services per calendar year**

Based on NACCHO/RACGP [guidelines](#) and use [age-specific templates](#):

0 to 5 years
5 to 12 years
12 to 24 years

25 to 49 years
≥ 50 years
Not available for hospital in-patients or residential aged care residents.

These templates outline core recommended elements and can be adapted to local needs and priorities. Templates can be integrated into clinical software.

STEP 1. Before the assessment

- Explain the purpose, obtain and record patient consent.
- Use the relevant age-specific template.
- Nurses or Aboriginal Health Workers may assist under GP supervision.

STEP 2. Conduct the **715** assessment

- Take your patient's history.
- Examine your patient and investigate as required.
- Recommend appropriate interventions.
- Keep a health assessment record.

STEP 3. Provide *patient-centered and culturally appropriate care*:

- Adapt the health check content to what is appropriate for patient.
- Discuss patient priorities and goals.
- Ask questions in ways that acknowledge strengths, that are sensitive to individual circumstances and that avoid cultural stereotypes.
- Make a plan for follow-up of identified health needs together with patient.
- Offer the patient a copy of the health assessment.
- Consider seeking patient feedback on their experience for improvements.

STEP 4. After the assessment

- Refer the patient to appropriate/necessary allied and specialist health services.
- Arrange follow up appointments with the practice nurse or Aboriginal Health Worker/Practitioner.
- Schedule further appointments to undertake a Chronic Condition Management Plan or Mental Health Treatment Plan if chronic conditions are identified.
- Consider referral to the [Integrated Team Care \(ITC\) Program](#) if complex chronic conditions and needs are identified.
- Add a recall/reminder for their next health check in 9 months.
- Offer a written report on assessment & recommendations.



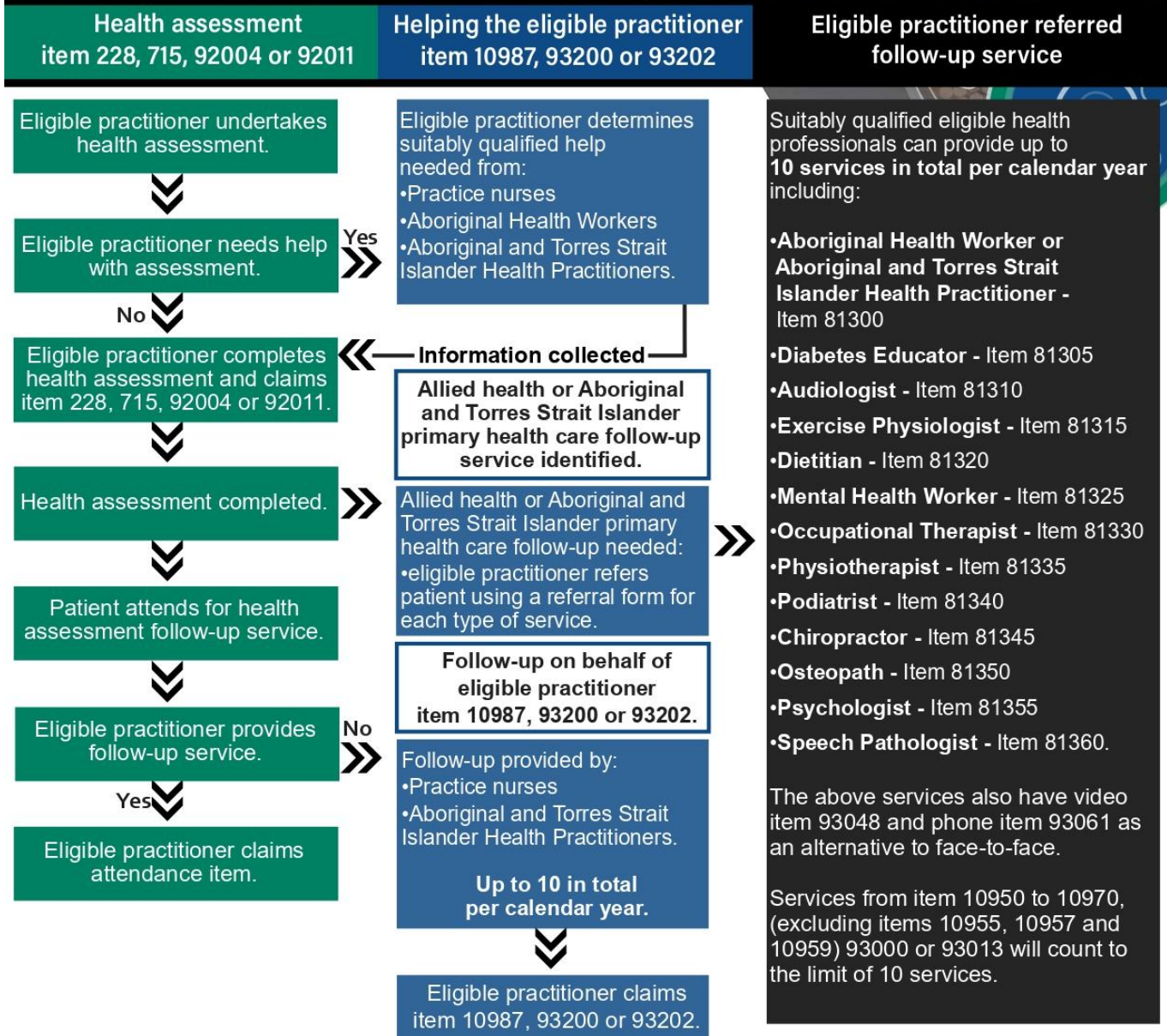
715 Health Check brochures and posters are available [online](#)

Resources:

- [Service Australia - health assessments and follow-up services](#)
- [NACCHO/ RACGP High quality health check](#)
- [Telehealth – considerations for an effective Aboriginal and Torres Strait Islander health check](#)
- [Videos, posters and brochures for clinicians and patients](#)
- [Department of Health Annual health checks for Aboriginal and Torres Strait Islander people](#)



Completing an Aboriginal and Torres Strait Islander health assessment



Go to mbsonline.gov.au for more information about billing these items

Source: <https://hpe.servicesaustralia.gov.au/INFO/IHS/IHSM05INFO1.pdf>

Indigenous Health Incentive

The **Practice Incentive Program – Indigenous Health Incentive (PIP-IHI)** seeks to address this gap providing financial support for practices caring for Aboriginal and Torres Strait Islander patients to achieve best practice management of chronic conditions and mental disorders. The PIP-IHI has 2 payment types: **sign-on payment \$1,000** and outcome payments (paid annually):

Tier 1 \$100 – 2 eligible MBS services in 12 months
e.g. GPCCMP, GP Mental Health Treatment Plan

Tier 2 \$300 - 5 eligible MBS services in 12 months
e.g. professional attendance and procedural items

For eligible MBS Items, visit [PIP-IHI Guidelines](#)

STEP 1 - Practice eligibility

- Be RACGP-accredited
- [Apply for PIP-IHI](#) via HPOS or PIP form.
- Meet [PIP Guidelines and requirements](#)
- Ensure follow-up of registered patients.
- Care for Aboriginal and Torres Strait Islander patients with a **chronic condition** or **mental disorder**.
- Have two staff (one must be a GP) complete cultural awareness training within 12 months of being approved for the PIP IHI.

STEP 2 - Patient eligibility

- Aboriginal and/or Torres Strait Islander origin with a Medicare card Parent/guardian must consent for patients under 15.
- Has a **chronic condition** or a **mental disorder**
- Has had or been offered [a 715 health assessment for Aboriginal and/or Torres Strait Islander people](#)
- Nominated your practice and 'usual care provider' consent using [registration and consent form \(IP017\)](#) (once in a lifetime).

Note: Patients can withdraw anytime (via HPOS) and keep forms for 6 years.

STEP 3- Register your patient

Once a patient has [consented via registration form \(IP017\)](#), register patients via [HPOS](#)

1. [PRODA](#) → [HPOS](#) Go to service → 'My Programs' → Practice Incentive Program (PIP)

2. Under 'Action' → select 'Update'

Current PIP Practices		
Practice ID	Practice Name	Action
0000	MY PRACTICE	Update

3. Main menu → select **Indigenous Health Incentive** → [Patient Search/Register/Update](#)

4. **Search criteria 1 or 2** → search

You need to enter the patient's Medicare Card Number, Individual Reference Number (IRN) and First Name for Search criteria 1, or their full name and Date Of Birth for Search criteria 2.

5. **Patient eligibility questions**

Answer the following questions	
1. Does this patient have a chronic disease or mental disorder?	<input checked="" type="radio"/> Yes <input type="radio"/> No
2. Has this patient had, or been offered, the appropriate health check for Aboriginal and Torres Strait Islander Australians?	<input checked="" type="radio"/> Yes <input type="radio"/> No

6. **Submit**

7. **Maintain a list of PIP-IHI registered patients**

Learn more:

- [Service Australia eLearning](#)
- [National guide to a preventive health assessment for Aboriginal and Torres Strait Islander people](#)
- [Five steps towards excellent Aboriginal and Torres Strait Islander healthcare](#)
- [Chronic condition and Aboriginal and Torres Strait Islander people](#)
- [Mental health program Aboriginal and Torres Strait Islander](#)
- [Indigenous Health Incentive guidelines](#)

Service Australia

1800 222 032

Email:

pip@servicesaustralia.gov.au

Dates of Significance

Consider implementing targeted promotions, social media content, clinic-based initiatives, or patient education campaigns aligned with key dates of significance (including, but not limited to, the following)

- Survival Day – 26th January
- **National Apology Day** – 13th February
- National Close the Gap Day – 3rd Thursday in March
- **Harmony Day** – 21st March
- **National Sorry Day** – 26th May
- **National Reconciliation Week** – 27th May – 3rd June
- **Mabo Day** – 3rd June
- Coming of the Light – 1st July
- **National NAIDOC Week** – 1st week of July, Sunday to Sunday
- **National Aboriginal & Torres Strait Islander Children's Day** – 4th August
- **International Day of the World's Indigenous Peoples** – 9th August

Mental Health Services

The following culturally appropriate services aim to support the social, emotional, and mental wellbeing of Aboriginal and Torres Strait Islander peoples;

Service	Eligibility
<u>Odyssey House NSW - Mingu Yabun</u>	People aged over 18 experiencing difficulties with alcohol and drug use
<u>13YARN</u>	People who are feeling overwhelmed or having difficulty coping
<u>Marist 180 - Daramu Blacktown</u>	People aged 12-18 and live in Blacktown LGA who are at risk of criminal behaviour or in contact with the Police, Courts or Juvenile Justice NSW
<u>Marist 180 - Mudjin Byala Blacktown</u>	Supports children living in the Blacktown struggling with school attendance
<u>Junaya - Family Support & Counselling</u>	
<u>Junaya - Parenting Programs</u>	Triple P – Parents of children Resourceful Adolescents Parents Programs – Parents of children aged 11-15
<u>Junaya - Children and Youth Programs</u>	Youth Work - Children aged 12-18 years Deadly Mobs, Deadly Bonds - Children aged 10-18 years
<u>Brother to Brother</u> 1800 435 799	Aboriginal men who need someone to talk to about relationship issues, family violence, parenting, drug and alcohol issues or who are struggling to cope for other reasons.
<u>Thirrili</u>	Families impacted by a loss from suicide or other fatal traumatic incidents.
<u>Waruwi - NSW Aboriginal Safe Gambling Services</u>	Free counselling for Aboriginal people with gambling addictions.
<u>Greater Sydney Aboriginal Tenant Service (GSATS)</u>	Aboriginal and Torres Strait Islander renters in greater metropolitan Sydney.
<u>Greater Western Aboriginal Health Service</u>	All ages
<u>KEYS Network</u>	For families with children 0-5 years old living in Western Sydney and Lithgow who are not engaged with appropriate services to meet their holistic needs or require a multiagency response.
<u>Aboriginal Family and Domestic Violence Hotline</u>	Aboriginal people experiencing domestic, family and sexual violence
<u>Western Sydney LHD - Aboriginal Health Services</u>	Resident of Western Sydney
<u>The Shed</u>	Aboriginal and Torres Strait Islander men
<u>Mudjin-Gal</u>	Aboriginal and Torres Strait Islander women
<u>Community Restorative Centre - The Miranda Project</u>	People who identify as female who are at risk of both domestic violence and criminal legal system involvement.

Preventative Health

Immunisation

- [Aboriginal Immunisation Health Worker Program](#) – a brochure of recommended and funded immunisations
- [Talking about vaccination with Aboriginal and Torres Strait Islander families - NCIRS & SKAI](#) - guide designed to support providers to feel comfortable to have these conversations, and strongly recommend vaccinations.
- [First Nations Flu Vaccine Information Sheet](#)
- [Example of a supportive flu vaccine yarn](#)

Immunisation coverage fell for First Nations children from **91.3% to 88.1%** between 2020 and 2022
– WSPHN Needs Assessment 2025-2028

Smoking and Vaping Cessation

- [Quitline Quit Kit](#) – provides support for Aboriginal people to quit smoking and vaping.
- [NSW Aboriginal Quitline](#) - provides an individually tailored and culturally sensitive service to Aboriginal callers.
- [iCanQuit](#) – provides online support.
- [First Nations Vaping Facts - Lung Foundation Australia](#) –
- [My QuitBuddy app](#) -Designed to support patients on their journey providing helpful tips to overcome cravings, tracking systems to track progress and motivation to quit for good.
- [NSW Health smoking and vaping resources for Aboriginal young people](#) - factsheets and videos about smoking and vaping which were co-designed with Aboriginal young people
- [NSW Health Quit for new life brochures](#) - booklets with information for Aboriginal women who are smoking during pregnancy.

First Nations people were **2.6 times as likely** as non-Indigenous people to smoke daily
– [AIHW](#)

Healthy Eating & Physical Activity

- [Get Healthy Service](#) – NSW Government initiative offers free phone and online health coaching. [Aboriginal health coaches](#) available.
- [Go4Fun](#) – NSW Government initiative targeting primary school aged children and their families. [Aboriginal health coaches](#) are available.
- [First Nations healthy eating resources | Heart Foundation](#) - co-designed with First Nations communities, embedding culture, stories and knowledge, to support healthy eating and wellbeing.
- [Guide to Healthy Eating - Eat for Health](#) - a food selection guide which visually represents the proportion of the five food groups recommended for consumption each day.

Overweight and obesity increase the risk of health conditions including coronary heart disease, type 2 diabetes, kidney diseases, some cancers, joint and respiratory problems. Aboriginal and Torres Strait Islander people experience a disproportionately high rate of overweight and obesity.
- [AIHW Indigenous Health Performance Framework](#)



[WellMob](#) hosts a collection of co-designed culturally appropriate resources for a range of preventative health topics

GoShare

patient education platform

[Access now](#)

[GoShare](#) A patient education platform that enables health professionals to share trusted, tailored resources via email or SMS to improve health literacy and patient engagement.

WentWest has funded GoShare subscriptions for all general practices in Western Sydney. For access, contact support@wentwest.com.au

Diabetes Prevention & Management

“People who identify as Aboriginal are approximately 50% more likely to be diagnosed with diabetes than non-Aboriginal people. Among people admitted to WSLHD hospitals, nearly 20% of Aboriginal patients have diagnosed diabetes, compared with approximately 14% of non-Aboriginal patients”

Western Sydney Diabetes – Year in Review 2025

Mount Druit Community Diabetes Clinic

On **Mondays between 9am – 12:30pm**, Western Sydney Diabetes (WSD) runs a Diabetes clinic specifically for those who identify as Aboriginal and Torres Strait Islander.

Services include:

- Face-to-face or telehealth options available
- Referring GPs joins consults via telehealth to discuss patient management plan.
- Diabetes self-management skills
- Dietary advice
- Foot checks
- Blood glucose monitoring technology

How to Refer

Please submit a GP referral letter to the WSD Administration Team via:

- Email: wslhd-wsdiabetes@health.nsw.gov.au
- Fax: (02) 9851 6146

For general enquires, call (02) 8670 0365

Website: [Aboriginal and Torres Strait Islander Monday Clinic - Western Sydney Diabetes](#)

What is the 2kg Challenge?

The 2kg Challenge is part of the **Western Sydney Changing Diabetes partnership**, which brings together experts, like a doctor who specialises in diabetes (an Endocrinologist) and a qualified Dietitian. They guide you through the program. We also have coordinators and helpers who run the program and support the community to make healthy changes that last.

2kg Challenge To Beat Diabetes

The **2kg Challenge** is here to help the community learn more about type 2 diabetes, catch it early, and take small steps to stop it from happening. It is a **free, evidence-informed¹ 8-week program** that helps adults reduce their risk of type 2 diabetes through simple, sustainable lifestyle changes.

If you are at risk of diabetes, losing just **2kg** can reduce your chance of developing type 2 diabetes **by 30%**.

Refer Your Patients Who:

- ✓ Have pre-diabetes or are at risk of type 2 diabetes (e.g., if you live in Western Sydney, are over 40, or have a family history of diabetes), and
- ✓ Are above a healthy weight, and
- ✓ Want easy, practical tips to eat better and live healthier

How You Can Get Involved:

- Talk to eligible patients during consultations.
- Encourage them to sign up at 2kgchallenge.com.au
- Display 2kg Challenge resources.
- Share GoShare 2kg Challenge bundle.



For more information or support on Diabetes Prevention and Management in Western Sydney

Email: support@wentwest.com.au
Phone: (02) 8811 7117

Module 3

Team-Based Care

Closing the Gap PBS co-payment

The CTG Pharmaceutical Benefits Scheme (PBS) Co-Payment reduces the cost of PBS medicines for eligible Aboriginal and Torres Strait Islander patients. All PBS medicines are covered, including acute and chronic treatments and registration is once-off (lifetime). Age, residential address and chronic condition status doesn't impact access.

STEP 1 – Practice eligibility

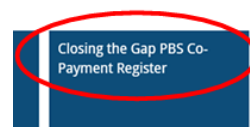
- A PBS prescriber works in the practice **or** an Aboriginal and/or Torres Strait Islander Health Practitioner registered with AHPRA and Medicare.
- The provider (or their HPOS delegate) has **PRODA** and **HPOS** access.

STEP 2 – Patient eligibility (assessed once)

- Self-identify as Aboriginal and/or Torres Strait Islander with Medicare card.
- Are likely to experience barriers to preventing or managing their condition without medicines.
- Are unlikely to maintain treatment without cost support.

STEP 3 – Register your patient

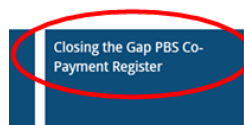
1. **Discuss CTG** with the patient and obtain consent.
2. Log in to **PRODA** → **HPOS**.
3. If you are not a prescriber, you must be delegated by a prescriber → Select **My providers** that you wish act on behalf of.
4. Select **My Programs** → **Closing the Gap PBS Co-Payment Register**.
5. Search for the patient (Medicare card number or name and date of birth.):
 - *Active* = already registered or *Inactive* = select **Register** ✓ **Register**
6. Confirm registration; reduced PBS pricing applies immediately.



My providers that you wish

STEP 5 – Prescribing under CTG

7. Check **medicine eligibility on the PBS website**
8. Confirm the patient's CTG registration in HPOS.
9. Annotate the prescription (optional but helpful):
10. Write "**CTG**" + initials/signature **or**
11. Use software-generated CTG code (e.g., CTG00B).



Note: Both private hospital pharmacies (Section 94) and public hospital pharmacies may dispense CTG prescriptions.

Resources

- [Closing the Gap \(CTG\) PBS co-payment](#)
- [Closing the Gap \(CTG\) PBS Program - NACCHO](#)
- [Closing the Gap \(CTG\) PBS co-payment - Pharmacists](#)
- [PBS Closing the Gap \(CTG\) PBS Co-payment Program](#)
- [CTG PBS Co-payment Program – Frequently Asked Questions \(PDF\)](#)
- [Information for First Nations People \(PDF\)](#)
- [Information for Community Pharmacies \(PDF\)](#)
- [Information for Hospital Pharmacies \(PDF\)](#)
- [Information for Prescribers and Aboriginal and Torres Strait Islander Health Practitioners \(PDF\)](#)

Services
Australia

Call: 132 290

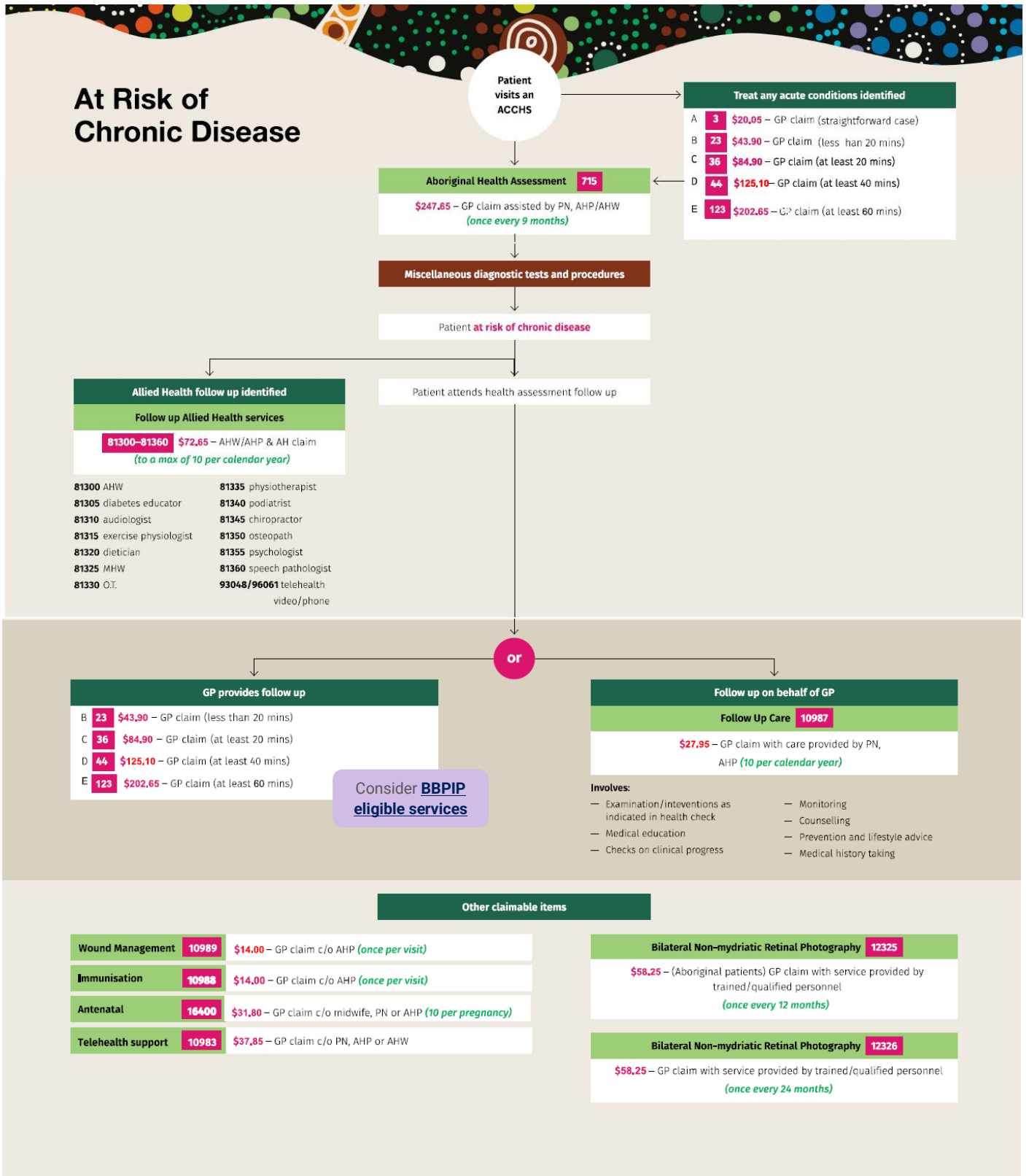
Email:

pbsindigenous@health.gov.au



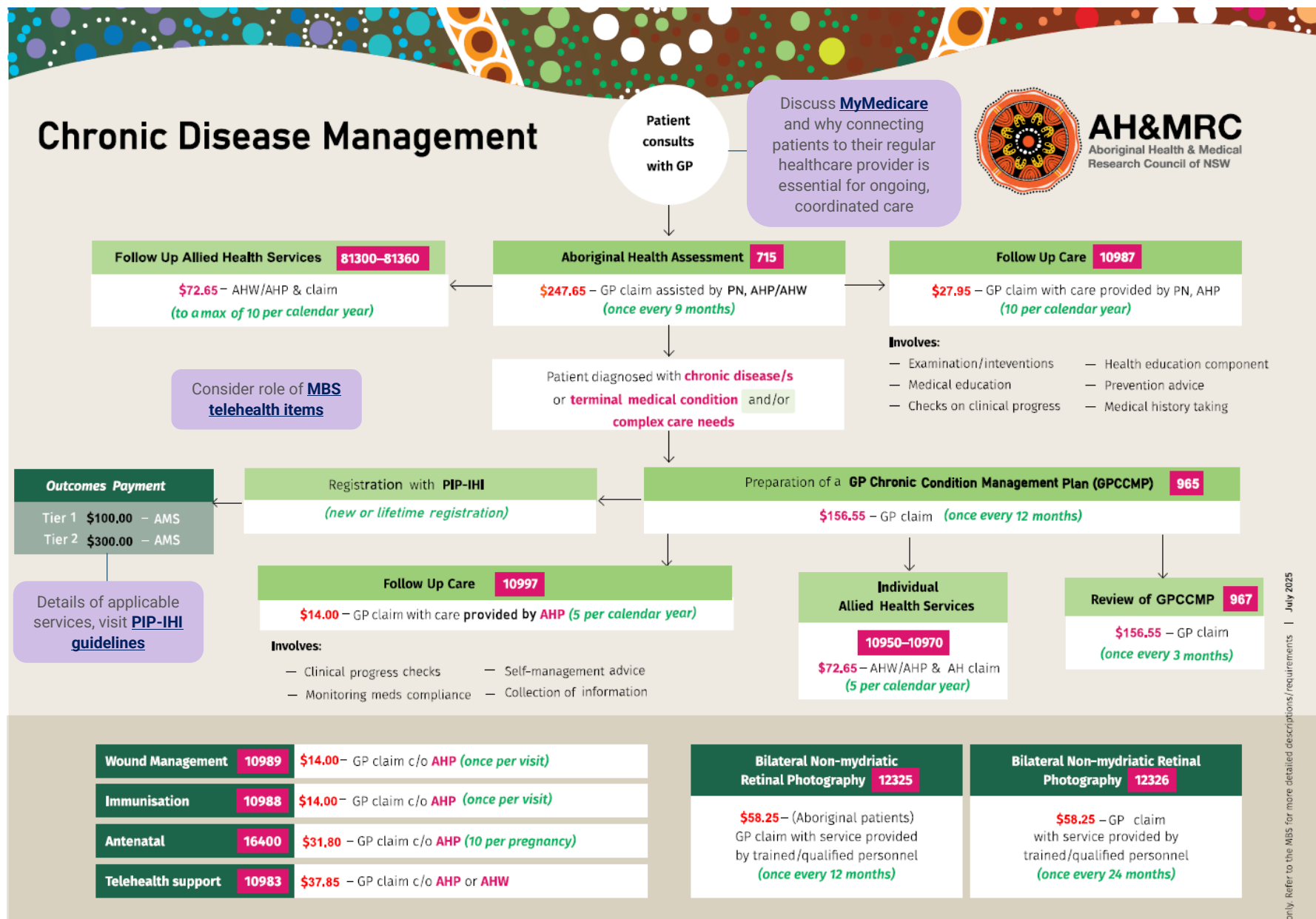
Team Workflow: Management of Patients At risk of Chronic Conditions

Access resource - [AHMRC | At Risk of Chronic Disease July 2025](#)



Team Workflow: Chronic Conditions Management

Access resource - [AHMRC | Chronic Disease Management July 2025](#)



Western Sydney Aboriginal Health Services

Across the Western Sydney PHN region, First Nations community members can access a range of commissioned services and programs delivered in partnership with local Aboriginal and not-for-profit health organisations to ensure culturally appropriate support. Visit Health Pathways: westernsydney.communityhealthpathways.org

<p>Greater Western Sydney Aboriginal Health Service (GWAHS) Mt DrUITT (02) 9836 7300 gwaHS.net.au</p>	<p>GWAHS offers culturally appropriate primary healthcare and support services for Aboriginal and Torres Strait Islander patients, including GP care, chronic disease management, mental health, and allied health services.</p>
<p>Integrated Team Care (ITC) Program (02) 8080-0522 westernsydneyitc.com.au</p>	<p>WentWest commissions the Integrated Team Care (ITC) Program to support Aboriginal and Torres Strait Islander people with chronic conditions by improving access to coordinated care, multidisciplinary services and culturally appropriate mainstream healthcare. ITC helps patients who struggle with multiple appointments, costs or transport and requires a current CCMP.</p>
<p>Aboriginal Counselling Services 0410 539 905 aboriginalcounsellingservices.com.au</p>	<p>Delivers culturally sensitive and safe mental health intervention and therapeutic counselling to people who identify as Aboriginal and Torres Strait Islander.</p>
<p>Baabayn Aboriginal Corporation (02) 8608 6054 baabayn.org.au</p>	<p>A culturally appropriate service supporting Elders and families to heal from intergenerational trauma, build resilience and develop healthy coping strategies. It provides social, emotional and wellbeing activities for Aboriginal and Torres Strait Islander people in Western Sydney.</p>
<p>Marrin Weejali Aboriginal Corporation 02 9628 3031 marrinweejali.org.au</p>	<p>Drug and alcohol counselling and non-acute mental health issues – helping patients overcome addiction and related issues in a culturally safe space.</p>
<p>The Rev. Bill Crews Foundation 02 8752 4600 billcrews.org</p>	<p>The Rev. Bill Crews Foundation is expanding its trauma therapy and healthcare services to Blacktown, ensuring more children and community members can access vital, compassionate support regardless of their circumstances.</p>
<p>Deadly Dreaming 1800 151 045 noffs.org.au</p>	<p>Offers weekly programs, workshops, and activities in six schools for Aboriginal and Torres Strait Islander young people who are in contact with, or at risk of encountering, the juvenile justice system.</p>
<p>Healing Minds, Healing Spirits (02) 9628 3031 marrinweejali.org.au</p>	<p>Provides intervention and case management to support adult Aboriginal and Torres Strait Islander people with families experiencing the harmful effects of alcohol and illicit substances to achieve physical, social, and emotional wellbeing.</p>
<p>The Shed (Mt DrUITT) 1300 550 099 mensshed.org</p>	<p>A supportive, safe environment, providing assistance with mental, physical and emotional wellbeing while connecting them to mental health, Centrelink, housing, legal and therapeutic services.</p>
<p>Too Deadly for Diabetes - Ray Kelly Fitness 0447 972 172 toodeadlyfordiabetes.com.au</p>	<p>A 10-week exercise, nutrition, education, and behavioural change program for Aboriginal and Torres Strait Islander community members living with chronic health conditions who have, or are at risk of developing, Type 2 Diabetes.</p>
<p>Co-Occurring Mental Health & AOD Residential Rehabilitation 0422 055 700 whos.com.au</p>	<p>A therapeutic program and case coordination service for Western Sydney community members who are drug and alcohol dependant and have co-occurring severe and complex mental health conditions.</p>
<p>Odyssey House 1800 397 739 odysseyhouse.com.au</p>	<p>Provides individual counselling and group programs that focus on increasing access to drug and alcohol services, for priority community including families with children, people leaving prison, people with co-occurring mental illness and people who identify as LGBTIQ+.</p>
<p>Little Possums - Child & Family Serv: (02) 4758 9966 ngrooeducation.org/little-possums</p>	<p>Provides culturally sensitive support through mentoring, advocacy and play therapy for school children that have experienced trauma. Available at Doonside Public School and Crawford Public School only.</p>
<p>Prison Transition Program & Pathways Home (02) 9288 8700 crcnsW.org.au</p>	<p>Supports people involved in the criminal justice system (including youth program 10–24 years) who experience cycles of drug use, homelessness and incarceration, including through-care for those leaving prison in Western Sydney.</p>

Module 4

Data-Driven Improvement

Before You Begin

- For access to PenCS Suite (including CAT 4), contact support@wentwest.com.au
- Ensure **CAT4 is installed and staff are trained** - use [CAT4 guide](#) or [videos](#)
- Clean your data** using [CAT4](#) (e.g. inactive records, remove duplicates).
- Ensure diagnoses are **coded, not free text** – use [CAT4 condition mapping](#)
- [Filter by doctor](#), condition, or age to create a smaller patient list.
- Ensure reminders are up to date

Indigenous Health Workflow Steps

Choose from the below CAT4 recipes to monitor key metrics when fostering Indigenous health initiatives at your practice:

1. Identifying First Nation People or Not Recorded - [Ethnicity Filtering](#)
2. [Identify patients eligible for an annual 715 Aboriginal and Torres Strait Islander Health Assessment](#)
3. [Identify Indigenous patients eligible for item 10987 follow-up service](#) – refer to below CAT4 Recipe
4. [Identifying eligible patients for a chronic condition care plan](#) – replace 721/723 with 965/967
5. [Identifying patients eligible for a Mental Health Treatment Plan](#)
6. [Identify Indigenous patients eligible for the NIP flu and COVID vaccine over 55 - 18-54](#)
7. [Identify Indigenous patients eligible for PBS Co-payment Measure](#)

For opportunistic screening use Topbar's [MBS app](#) and [PIPQI app](#) to notify you of any presenting patients who are eligible for the Health Check and missing information.

Accurate identification and ethnicity data underpin all effective data-driven improvements.



Measuring Outcome CPD

Tip: Collaborate as a team to generate a [CAT4 list of patients per GP](#).

[Cubiko](#) can assist with recording patient ethnicity and finding Indigenous patients potentially eligible for a 715 Health Assessment, MBS item 10987, CCM and Mental Health services.

Track & Reflect

- Download the [audit worksheet](#) or run [chart](#) template
- Run a PDSA** on a change idea and record your baseline
- As a team, reflect on What worked? What didn't?

Completed QI documentation for CPD

MBS ONLINE

- [Search for Item Number](#)
- [Fact Sheets](#)
- [Updates \(XML Files\)](#)
- [MBS News](#)

Eligibility

Ensure patient meets billing criteria.

- [HPOS MBS checker](#)
- [My Health Record](#)
- [Topbar MBS app](#)

More information

- www.mbsonline.gov.au
- Contact MBS 13 21 50 askMBS@health.gov.au
- [Western Sydney HealthPathways - MBS Items](#)

Help?

PEN CS Support 1800 762 993
support@pencs.com.au

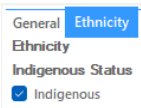
WentWest (02) 8811 7117
support@wentwest.com.au

Identify Indigenous patients eligible for item 10987 follow-up service

➤ **Starting point:**
 Log into Pen CS [CAT4](#) → Show Extracts → load latest data extract → Hide Extract

➤ **In Filter Panel**

1. General tab → **Ethnicity** → **Indigenous**
2. **Optional:** Under 'General' tab → Activity → Select '**Active (3 x in 2 yrs)**'
3. **MBS attendance** → select 12months → **MBS Item Numbers = 715**

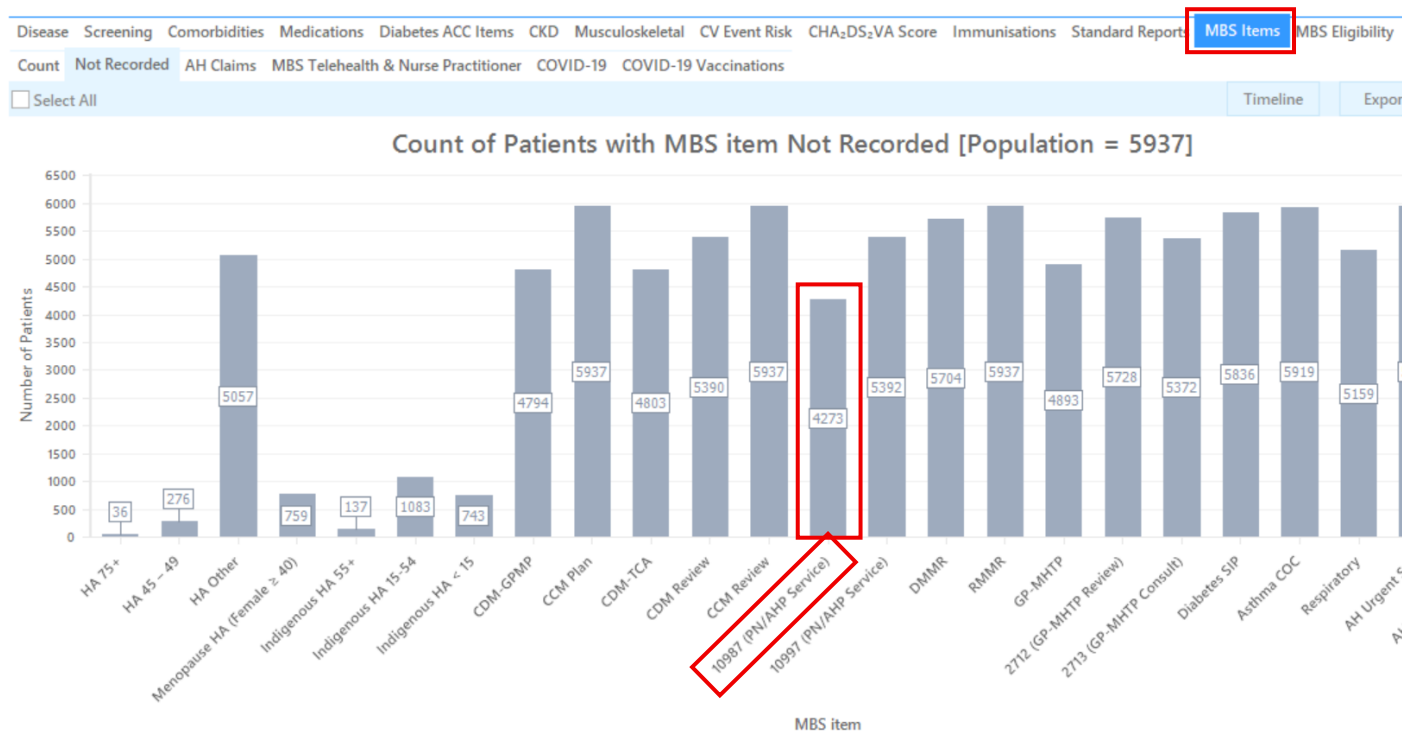


4. **Recalculate**



➤ **In Report Panel**

5. **MBS items** → **Not recorded** → **10987**



6. **Optional:** Select **Export** → **XLS File** → **Save** (e.g. Create a folder C:/ClinicalAudit/CAT Patient FollowUp)
7. **Optional:** **Filter patient list by provider** (Visits → Assigned Provider → Report)
8. **Optional:** **create a Topbar prompt** (Daily CAT → Export → Topbar Prompt)
9. **Optional:** if accessing Cubiko, create a **Cubiko Care Prompt**

GoShare patient education platform

[Access](#)

GoShare is a patient education platform enabling health professionals to send tailored, trusted resources—such as videos and fact sheets—via email or SMS to help patients manage their health, improve **health literacy, and boost engagement**.

WentWest has funded GoShare subscriptions for all general practices in Western Sydney.

For access, please contact us at support@wentwest.com.au

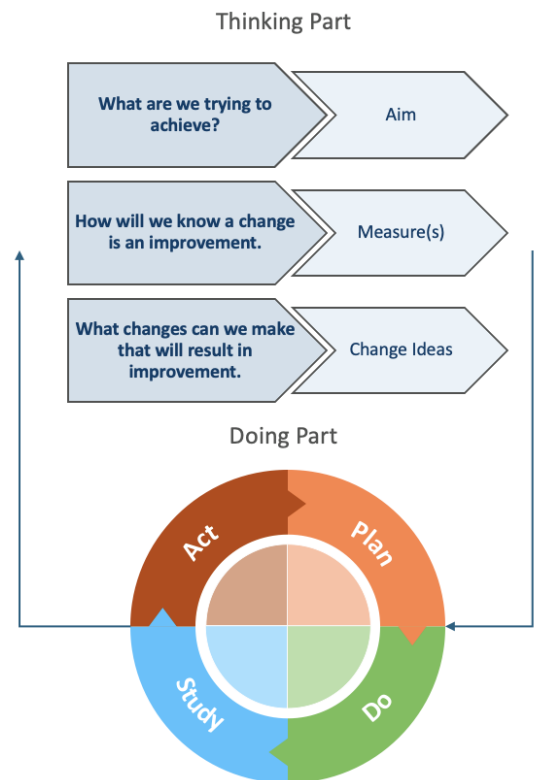
Model for Improvement and PDSA cycles

Start by documenting **your practice QI team** and define your problem and specified a robust **Problem Statement**.

Practice name:	Add your primary healthcare service name here	Date:	Start date
QI team:	List the team members involved		
Problem:	Describe why this work is strategically important. What problem is the team addressing? What does our data indicate about it, and what are the causes?		
Problem Statement:	Document your succinct problem statement here		

Step 1: Model for Improvement (Thinking Part)

- 1. Goal / Aim:** What are we trying to accomplish? Develop a S.M.A.R.T. (Specific, Measurable, Attainable, Realistic, Time-bound) and people-crafted Aim Statement.
- 2. MEASURE:** How will we know that a change is an improvement? Identify what good looks like and develop a measure(s) of success.
Tip: Use a Run Chart to plot trends.
- 3. CHANGE IDEAS:** What changes can we make that will result in an improvement? Engage the whole team in formulating change ideas using Institute for Healthcare Improvement QI tools such as brainstorming, driver diagrams or process mapping. Each change idea may involve multiple small rapid PDSA cycles.

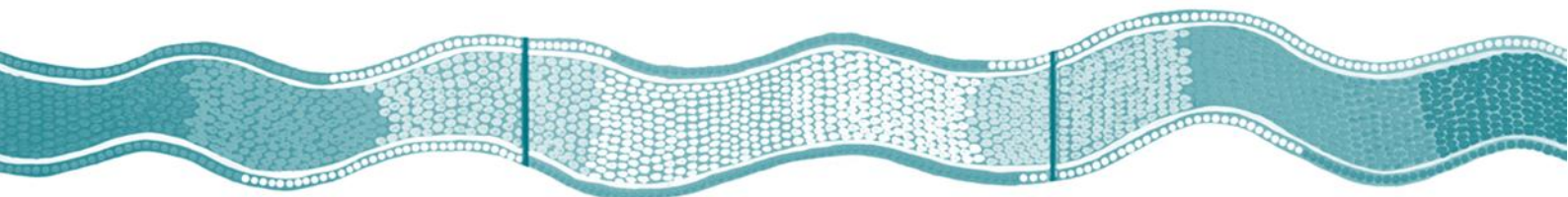


Step 2: Plan-Do-Study-Act (PDSA) (Doing Part)

- 1. PLAN:** Describe the change idea (what, who, when, where). Predict outcomes and define the data to collect.
- 2. DO:** Carry out the plan. Collect data. Consider what worked well and why? Document any unexpected observations, events or problems.
- 3. STUDY:** Analyse results, compare them to predictions, and reflect on what you learned.
- 4. ACT:** Based on what you learned from the test, consider what you will do next (e.g., adopt, adapt or abandon)? How does this inform the plan for your next PDSA?

For **guidance**, download [template](#) or for support on conducting quality improvement in your primary healthcare services, please contact the WentWest Primary Care Delivery team on support@wentwest.com.au or (02) 8811 7117

Source: Langley, G., Nolan, K., Nolan, T., Norman, C. & Provost, L. 1996, The Improvement Guide, Jossey-Bass, San Francisco, USA



PDSA – Increasing Health Assessments (715) for Aboriginal and Torres Strait patients

Model For Improvement (MFI)

AIM	1. What are we trying to accomplish?
To increase the number of Health Assessments (715) for Aboriginal and Torres Strait patients by 10% by 30th November	
MEASURE(S)	2. How will we know that a change is an improvement?
<ul style="list-style-type: none"> The number of active Aboriginal and Torres Strait Islander patients (CAT4 Ethnicity Filtering) The number of active Aboriginal and Torres Strait Islander patients who have not had a health assessment (715) in the past 9months. (CAT4 Recipe) 	
CHANGE IDEAS	3. What changes can we make that will result in improvement?
Idea 1	Identify eligible patients using CAT4/Topbar filters.
Idea 2	Use nurse-led workflows for pre-assessment
Idea 3	Send out reminders using GoShare patient education resources
Idea 4	Flag patients for opportunistic HHCs
Idea 5	Promote Heart Health Week to boost awareness and bookings
Next steps:	<i>Each idea may involve multiple short and small PDSA cycles.</i>

An Example of a Plan-Do-Study-Act (PDSA)

Idea	Plan	Do	Study	Act
1.1	<p>Extract CAT4 list of Aboriginal and Torres Strait Islander patients without a Health Assessment.'</p> <p>Who: Practice manager When: Week 1 Where: at practice Prediction: At least 40% of Aboriginal and Torres Strait Islander patients will have a health assessment by the end of this work.</p>	<p>Completed 15th September. The receptionist contacted PHN for support with the PenCS CAT4 search and the export function. The data search was conducted very quickly, with the receptionist being upskilled to conduct further relevant searches.</p>	<p>At the end of October, a total of 44 active Aboriginal and Torres Islander patients (37%) have now had a Health Assessment (715). We did not reach our aim of 40% (which would have been 48 patients). Despite falling short, it is encouraging that we were able to improve by 21% in two months. We may not have allowed ourselves enough time to achieve our goal. We did have one main GP on sick leave this month which may have reduced our ability to reach our goal. We also may have GPs who are not completing Aboriginal and Torres Strait Islander Health Assessment appropriately, or not claiming them properly through MBS items.</p>	<p>1. Need to identify which GPs are not completing Aboriginal and Torres Strait Islander Health Assessment (715) and help increase the percentage completed.</p> <p>2. Need to monitor monthly data collection report data from CAT4 to ensure recording rates continue to increase.</p> <p>3. Ensure the clinical team know how to complete Aboriginal and Torres Strait Islander Health Assessment 715 templates in medical software and know how to claim the right MBS item number.</p> <p>4. We could put a Topbar reminder in, so that GPs can discuss with a patient opportunistically. Remind the whole team that this is an area of focus for the practice.</p>

Resources

Western Sydney [Aboriginal and Torres Strait Islander Health HealthPathways](#) provides health professionals with up-to-date clinical guidelines, referral pathways, and local service information to support best-practice care.

Practice Resources

Identification

- [Indigenous Identification | AIHW](#)
- [Identification Training tool | AIHW](#)
- [Identification of Aboriginal and Torres Strait Islander people | RACGP](#)
- [Identification Brochure for Staff | AIHW](#)

Population Data, Key Facts and Overviews

- [Indigenous Australians Overview | AIHW](#)
- [Key Facts | NACCHO](#)

Cultural Safety & Workplace Capacity

- [Cultural Protocols and Perspectives | RACGP](#)
- [Cultural Safety Program | AIDA](#)
- [Cultural Awareness Education & Cultural Safety Training | RACGP](#)
- [Guide to Improving Care for Aboriginal and Torres Strait Islander People | Australian Commission on Safety and Quality in Health Care](#)

Health Programs & Policy

- [Aboriginal and Torres Strait Islander Health | DHDA](#)
- [Aboriginal Health Impact Statement | NSW Health](#)

Medicare, MBS & Services Australia

- [Frequently claimed MBS items | DHDA](#)
- [MBS guide | RACGP](#)
- [Medicare Indigenous Enrolments | Services Australia](#)
- [Your Guide to Medicare for Indigenous Health Services | Services Australia](#)
- [Indigenous Health Services | Services Australia](#)

Health Checks & Preventive Care

- [Health check templates | DHDA](#)
- [Telehealth – Considerations for an Effective Health Check | RACGP](#)
- [Australian Immunisation Handbook | DHDA](#)

Health Professional Education & Training

- [Health Professional Education Resources | Services Australia](#)
- [Indigenous Health Education for Health Professionals | Services Australia](#)

Patient Resources

Culture, History & Self Determination

- [Empowering Indigenous Voices | From the Heart](#)
- [Working with Stolen Generations | Healing Foundation](#)
- [Uluru Statement from the Heart](#)
- [Close the Gap](#)
- [Intergenerational Trauma Animation | Emerging Minds](#)

Access, Identification & Medicare-Related

- [Identification Poster | AIHW](#)
- [Patient Fact Sheet: Identification | AIHW](#)
- [715 Health Check Brochure | DHDA](#)
- [Indigenous Access Program | Services Australia](#)
- [Aboriginal and Torres Strait Islander Access Line 1800 556 955](#) – support for Medicare service or payment

Health & Wellbeing

- [NACCHO Resources](#)
- [Australian Indigenous HealthInfoNet](#)
- [Wellmob](#) - Social, emotional and cultural wellbeing online resources for First Nations people
- [Aboriginal and Torres Strait Islander Health Resources | DHDA](#)

Health conditions & Specific Care Areas

- [Palliative Care Resources](#)
- [Kidney Health Australia Resources](#)
- [Diabetes – First Nation Patients](#)

Cancer support

- [Our Mob and Cancer](#)
- [Cancer: What to expect](#)
- [Cervical screening for Aboriginal women | Cancer Institute NSW](#)
- [Looking After Your Breasts flyer | Cancer Australia](#)
- [My Breast Cancer Journey | Cancer Australia](#)
- [My Lung Cancer Pathway | Cancer Australia](#)
- [Resources for health professionals and health services | Cancer Australia](#)
- [Culturally Safe Communication Skills: Tips for Non-Indigenous Health Professionals | Cancer Australia](#)



