

Health Equity Implementation Plan 2025-2028

Priority Area 1 - Actively eliminating racial discrimination and institutional racism							
Implementation Focus Areas	What this looks like	How we will achieve this	Executive Lead Sponsor	Executive Co-Sponsor	1	2	3
Reporting Racial Discrimination	Improve the reporting and resolution processes for racial discrimination concerns, ensuring Aboriginal and Torres Strait Islander people feel safe, heard, and supported when raising complaints.	Review current racial discrimination data collection, policies, and complaint-handling processes. Implement recommendations to ensure reporting and resolution systems align with legislative standards, organisational policies, and community expectations.	Health Service Chief Workforce & Engagement	General Manager – North General Manager – South Medical Services Allied Health Nursing & Midwifery Corporate Services & Infrastructure Strategy, Digital and Performance Aboriginal & Torres Strait Islander Health Finance			
Creating Safe and Inclusive Workplaces	Foster a workplace culture where staff feel supported and equipped to engage in courageous conversations about race, culture, and inclusion. Strengthen understanding of systemic and interpersonal bias, and promote respectful, inclusive behaviours that create safer care environments for Aboriginal and Torres Strait Islander people.	Deliver education sessions and facilitate discussions that provide staff with the tools, knowledge, and confidence to reflect on bias, listen to lived experiences, and engage in culturally responsive dialogue. Integrate these sessions into staff development programs and orientation to build awareness, accountability, and inclusive workplace culture.	Health Service Chief Aboriginal & Torres Strait Islander Health	General Manager – North General Manager – South Medical Services Allied Health Nursing & Midwifery Workforce & Engagement Corporate Services & Infrastructure Strategy, Digital and Performance Finance			
Culturally Safe Recruitment	Embed mandatory cultural and community-focused questions in all recruitment processes to assess candidates' understanding, experience, and commitment to working effectively with Aboriginal and Torres Strait Islander people and communities.	Develop and implement standardised interview and selection questions that assess candidate's cultural knowledge, community engagement experience, and ability to contribute to culturally safe workplaces. Provide training for selection panels and hiring managers to ensure consistency and fairness and conduct regular audits and feedback to promote continuous improvement and inclusive recruitment practices.	Workforce & Engagement	General Manager – North General Manager – South Medical Services Allied Health Nursing & Midwifery Corporate Services & Infrastructure Strategy, Digital and Performance Aboriginal & Torres Strait Islander Health Finance			
Respectful and Unbiased Clinical Documentation	Ensure all clinical documentation is culturally respectful, strengths-based, and free from bias or language that may diminish the dignity or experiences of Aboriginal and Torres Strait Islander people.	Review existing clinical documentation processes to identify and address bias or culturally insensitive language. Support staff through education and mentoring to apply respectful, strengths-based documentation practices.	Medical Services Strategy, Digital and Performance	General Manager – North General Manager – South Allied Health Nursing & Midwifery Aboriginal & Torres Strait Islander Health			
Community Guides	Establish and maintain community-specific cultural guides to strengthen local knowledge, connection, and understanding for clinicians and visiting staff, supporting culturally safe engagement, trust, and effective service delivery on Country.	Create, launch, and review Community Guides to ensure they include key cultural, historical, and community information. Integrate the guides into staff orientation, onboarding, and cultural capability training to strengthen local understanding and support culturally safe engagement across all communities.	Aboriginal and Torres Strait Islander Health Workforce & Engagement	General Manager – North General Manager – South Medical Services Allied Health Nursing & Midwifery Workforce & Engagement Corporate Services & Infrastructure Strategy, Digital and Performance Finance			

LEGEND: ■ To be completed in Year 1 ■ To be completed in Year 2 ■ To be completed in Year 3

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Priority Area 2: Increase Access to healthcare services							
Implementation Focus Areas	What this looks like	How we will achieve this	Executive Lead Sponsor	Executive Co-Sponsor	1	2	3
Health Equity Funding and Investment	Strengthen health service planning and investment processes to ensure funding priorities and proposals address identified service gaps, support sustainability, and promote equitable access to quality care for all communities.	Work collaboratively across planning, finance, and clinical teams to align funding proposals with evidence-based priorities and identified community needs. Develop and submit funding proposals that target equity gaps and service improvement opportunities, while monitoring the impact of investments on accessibility, outcomes, and health equity across the region.	Aboriginal and Torres Strait Islander Health General Manager – North General Manager – South	Medical Services Allied Health Nursing & Midwifery Finance			
Equitable and Localised Health Access	Deliver equitable, culturally safe, and accessible health services across all communities through coordinated, place-based, and community-led models of care that ensure services are responsive to local needs and priorities.	Enhance coordination across health service areas to strengthen outreach, home-visiting, and community-based service delivery. Develop flexible service delivery models that increase local access and continuity of care, ensuring communities receive timely, culturally appropriate, and needs-based health services closer to home.	General Manager – North General Manager – South Medical Services Allied Health Nursing & Midwifery	Corporate Services & Infrastructure Strategy, Digital and Performance Finance			
Accessible Virtual Care	Enhance access and continuity of specialist and follow-up care through culturally safe telehealth and virtual service models. Ensure patients in remote communities can maintain ongoing access to outreach services between visits, reducing travel to major hospitals and minimising financial and emotional stress for families.	Improve the coordination, consistency, and utilisation of telehealth within existing outreach programs to maintain patient engagement between visits. Strengthen referral, scheduling, and follow up processes to support continuity of care, collaboration between visiting clinicians and local staff, and seamless patient experience across all service points. Collaborate with health partners to design and implement virtual care pathways that enable service delivery locally where clinically appropriate. Increase the use of telehealth for specialist consultation, screening and follow-up appointment to improve access and reduce the need for travel.	General Manager – North General Manager – South Medical Services Allied Health Nursing & Midwifery	Corporate Services & Infrastructure Strategy, Digital and Performance			
Patient Travel and Support Services	Strengthen the coordination, accessibility, and responsiveness of patient travel and accommodation support systems to reduce barriers to care and ensure patients and families from remote communities are well supported throughout their journey of care.	Review and refine existing patient travel processes to enhance coordination, accessibility, and continuity of care. Capture and use feedback to guide ongoing improvements and ensure patient travel systems remain culturally responsive, efficient, and supportive of community needs.	Corporate Services & Infrastructure	General Manager – North General Manager – South Finance			
Strategic Infrastructure Supporting Access and Culture	Plan, build, and maintain fit-for-purpose health and staff infrastructure that supports equitable access and reflects the cultural identities, values, and beliefs of the communities we serve. Work in partnership with communities to ensure environments are welcoming, safe, and culturally meaningful.	Collaborate with communities, Traditional Owners, and key stakeholders to inform infrastructure planning, design, and delivery. Ensure new builds and refurbishments promote belonging, cultural safety, and accessibility for staff, patients, and community members.	Corporate Services & Infrastructure	General Manager – North General Manager – South			

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Priority Area 3: Influence the social, cultural, and economic determinants of health

Implementation Focus Areas	What this looks like	How we will achieve this	Executive Lead Sponsor	Executive Co-Sponsor	1	2	3
Data Capability and Workforce Development	Improve staff access to relevant and timely health data to support evidence-informed planning, service improvement, and monitoring of health equity outcomes across all communities.	Provide accessible health data resources, dashboards, and reports that support workforce understanding and use of information for local decision-making. Strengthen data systems to ensure accuracy, transparency, and ease of access, enabling staff to apply data insights to guide service delivery and performance improvement.	Strategy, Digital and Performance	General Manager -North General Manager – South Medical Services Nursing & Midwifery Allied Health Aboriginal and Torres Strait Islander Health			
Community Health Profiles and Empowerment	Develop and share community health profiles that provide clear, localised data on health outcomes, service activity, and social determinants of health. Empower communities to use information for local planning, advocacy, and health education, and strengthen engagement through local health action groups and interagency collaboration.	Work collaboratively with stakeholders to prepare and publish community health profiles tailored to each 35 communities, context. Ensure profiles are written in plain language and made accessible to stakeholders, local councils, community members and local interagency networks through online platforms. Release profiles twice a year to promote transparency, support community engagement, and guide joint planning and local health actions.	Strategy, Digital and Performance	General Manager – North General Manager – South			
Health Checks and Screening Access	Increase participation in community-based health checks and screening across all communities to strengthen early detection, improve local health outcomes, and ensure people can access the right care at the right time.	Deliver health checks and screening services across a range of health and wellbeing needs, informed by current data and community priorities.	General Manager -North General Manager - South Aboriginal and Torres Strait Islander Health	Medical Services Nursing & Midwifery Allied Health			
Community-Led Economic Growth	Strengthen procurement pathways to increase opportunities for Aboriginal and Torres Strait Islander businesses across the Torres and Cape region, supporting community health, employment, and sustainable, self-determined regional economies.	Create, review, and implement inclusive procurement and finance systems that prioritise local Aboriginal and Torres Strait Islander suppliers. Strengthen partnerships and accountability mechanisms to improve access, transparency, and participation of Indigenous businesses in procurement opportunities.	Finance Aboriginal and Torres Strait Islander Health	General Manager – North General Manager – South			
Collaborative Partnerships for Community Wellbeing	Strengthen partnerships and collaboration with local councils, organisations, and key stakeholders to improve coordination, information sharing, and collective action that supports community wellbeing and addresses the broader factors influencing health outcomes.	Identify and engage key external partners to support joint planning, data sharing, and community-led initiatives that contribute to improved health and wellbeing. Formalise partnership agreements, clearly define roles and shared priorities, and conduct annual reviews to assess progress and ensure alignment with evolving community needs.	Health Service Chief General Manager – North General Manager – South	Medical Services Nursing & Midwifery Allied Health			

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Priority Area 4: Deliver sustainable, culturally safe and responsive healthcare services

Implementation Focus Areas	What this looks like	How we will achieve this	Executive Lead Sponsor	Executive Co-Sponsor	1	2	3
Culturally Safe Environments and Celebrations	Create warm, welcoming, and culturally safe environments across all health facilities that reflect and celebrate Aboriginal and Torres Strait Islander identities, cultures, and histories. Recognise and celebrate significant cultural events and dates with the same value and visibility as key health awareness campaigns.	Enhance physical environments through culturally appropriate artwork, signage, languages, and community-designed spaces. Develop an annual calendar that showcases both Aboriginal and Torres Strait Islander cultural significance dates and key health awareness campaigns. Support staff participation in celebrations and community-led activities that promote belonging, respect, and cultural pride within the workplace and across health services.	General Manager – North General Manager – South Medical Services Nursing & Midwifery Allied Health	Aboriginal and Torres Strait Islander			
Community Information and Awareness	Establish consistent and transparent approaches to community information sharing to build trust and awareness about local health services across all TCHHS facilities.	TCHHS will implement organisation wide principles and minimum standards for information sharing to ensure that every facility maintains accessible space, physical or digital, that provide clear, accurate, and up-to-date information for staff, patients, and communities. Information sharing will not be limited to service availability and visiting schedules but will also include contact details for key staff and programs, patient travel processes and supports, health promotion campaigns, community events, and other relevant information that supports local understanding of available services. Each facility will be responsible for maintaining and updating information regularly to ensure accuracy, consistency, and transparency across all sites.	General Manager – North General Manager – South Strategy, Digital and Performance	Aboriginal and Torres Strait Islander			
Cultural Practices and Policy Reform	Ensure all clinical and operational policies reflect cultural protocols, respect Aboriginal and Torres Strait Islander knowledge systems, and uphold the rights and dignity of individuals and communities.	Review existing clinical and operational policies to identify and address cultural gaps and barriers. Develop a guiding framework and set of principles to ensure all future policy and procedure development aligns with cultural safety, equity, and human rights standards.	Aboriginal and Torres Strait Islander Medical Services General Manager – North General Manager – South	Nursing & Midwifery Allied Health Workforce & Engagement Strategy, Digital and Performance Corporate Services & Infrastructure Finance			
Cultural Capability and Orientation	Increase opportunities for culturally and clinically safe Cultural Capability Training that builds staff understanding of Aboriginal and Torres Strait Islander cultures, histories, and health perspectives, and strengthens culturally safe practice across all service areas.	Work with local staff and community members to update and enhance Cultural Capability Training. Integrate Cape York and Torres Strait Island-specific content and deliver training through a mix of online, face-to-face, and interactive sessions. Ensure staff complete and maintain Cultural Capability Training to embed culturally safe practice across the organisation.	Aboriginal and Torres Strait Islander Workforce & Engagement	General Manager – North General Manager – South Nursing & Midwifery Allied Health Strategy, Digital and Performance Corporate Services & Infrastructure Finance			

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Priority Area 5: Work with Aboriginal and Torres Strait Islander people to design, deliver, monitor and review health services

Implementation Focus Areas	What this looks like	How we will achieve this	Executive Lead Sponsor	Executive Co-Sponsor	1	2	3
Cultural Governance and Representation	Strengthen cultural governance across the organisation by ensuring frameworks, committees, and advisory groups actively uphold cultural safety and embed Aboriginal and Torres Strait Islander perspectives in decision-making at all levels.	Review and update existing governance structures and mechanisms to strengthen cultural safety oversight. Establish new committees or advisory groups where required and enhance existing committees to increase Aboriginal and Torres Strait Islander representation and ensure cultural perspectives are reflected in key organisational decisions.	Health Service Chief Aboriginal and Torres Strait Islander	General Manager – North General Manager – South			
Co-Design and Community Representation	Establish a consistent and culturally safe approach to co-design across all TCHHS teams to ensure Aboriginal and Torres Strait Islander voices, lived experiences, and cultural knowledge inform the design, enhancement, and delivery of programs and services.	Develop a TCHHS co-design framework outlining consultation requirements and expectations for all teams when enhancing existing programs or developing new initiatives. Ensure Aboriginal and Torres Strait Islander representation is embedded at every stage of program design, implementation, and evaluation. Provide staff with practical guidance and tools to engage respectfully, maintain relationships, and ensure local knowledge shapes service delivery.	Aboriginal and Torres Strait Islander	General Manager – North General Manager – South			
Collaborative Leadership and Community Connection	Strengthen trust and relationships between TCHHS executive leadership and communities through regular, meaningful on-Country visits. These visits enable leaders to engage directly with staff, councils, and community members to understand local challenges, barriers, and priorities, and to build genuine, ongoing relationships that inform strategic decision-making.	Create and implement a schedule for regular executive leadership visits across all Torres and Cape communities. Ensure visits focus on listening, relationship-building, and identifying opportunities to address barriers to equitable care and community wellbeing. Establish a baseline measure and reporting mechanism to capture and present executive engagement and community consultation activities across TCHHS.	Health Service Chief General Manager – North General Manager – South Aboriginal & Torres Strait Islander Health	Medical Services Allied Health Nursing & Midwifery Corporate Services & Infrastructure Strategy, Digital and Performance Workforce & Engagement Finance			
Ongoing Community Partnerships for Health Equity	Maintain and strengthen trusted relationships with Aboriginal and Torres Strait Islander communities through consistent, two-way communication about Health Equity priorities, progress, and outcomes. Ensure communities remain informed, engaged, and active partners in implementing and monitoring the Health Equity Strategy.	Conduct ongoing community engagement through regular visits, community meetings, and culturally appropriate communication channels such as newsletters, social media, and local radio updates. Provide accessible information on Health Equity Strategy progress, achievements, and next steps. Capture community feedback and perspectives to inform continuous improvement and ensure accountability to those consulted.	Aboriginal & Torres Strait Islander Health	General Manager – North General Manager – South			

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Priority Area 6: Strengthen Aboriginal and Torres Strait Islander Workforce

Implementation Focus Areas	What this looks like	How we will achieve this	Executive Lead Sponsor	Executive Co-Sponsor	1	2	3
Employer of Choice and Career Promotion	Promote TCHHS as an employer of choice by showcasing diverse career, study, and training opportunities available to Aboriginal and Torres Strait Islander peoples across all program initiatives and professions.	Develop and implement a workforce attraction and promotion campaign highlighting programs such as deadly start, traineeships, cadetships, work experience, graduate pathways, and leadership roles. Share staff stories, career journeys, and education opportunities through schools, training providers, community events, and digital platforms to inspire participation and strengthen workforce visibility.	Workforce & Engagement Strategy, Digital and Performance	General Manager – North General Manager – South			
Entry-Level and Graduate Opportunities	Strengthen pathways for Aboriginal and Strait Islander peoples to enter and transition successfully into the health workforce through work experience, traineeship, deadly start, cadetship and graduate programs. Build confidence, skills, and local employment opportunities, that support a sustainable, culturally strong workforce.	Create, promote, and report on work experience, traineeships, deadly school start, cadetship, graduate programs. Collaborate with schools, training providers, and university to support recruitment, supervision and successful completion. Monitor admission, progression, and completion data to identify and strengthen pathways and improve long-term employment outcomes.	Workforce & Engagement General Manager – North General Manager – South	Medical Services Allied Health Nursing & Midwifery Corporate Services & Infrastructure Strategy, Digital and Performance Workforce & Engagement Finance			
Career Pathways	Increase Aboriginal and Torres Strait Islander positions across all professional streams, prioritising areas with low representation such as Nursing, Allied Health, and Medical Services, to strengthen cultural representation, workforce visibility, and career progression within TCHHS.	Implement targeted recruitment and career development initiatives to attract, support, and retain Aboriginal and Torres Strait Islander professionals. Focus on building sustainable pathways and succession opportunities that increase participation in underrepresented professions and strengthen long-term workforce diversity and capacity.	Workforce & Engagement Medical Services Allied Health Nursing & Midwifery	General Manager – North General Manager – South Corporate Services & Infrastructure Strategy, Digital and Performance Workforce & Engagement Finance			
Leadership and Mentoring Pathways	Develop structured leadership and mentoring pathways that support the growth, confidence, and advancement of Aboriginal and Torres Strait Islander staff across all professional levels. Create opportunities for emerging leaders to step into management and senior roles through supported career development.	Design and implement leadership and mentoring programs tailored to Aboriginal and Torres Strait Islander staff, incorporating coaching, peer support, and management skill development. Promote Expressions of Interest (EOIs) for current and upcoming manager roles to encourage participation and visibility of Aboriginal and Torres Strait Islander leaders.	General Manager - North General Manager - South Aboriginal and Torres Strait Islander Health	Medical Services Allied Health Nursing & Midwifery Aboriginal and Torres Strait Islander Health Corporate Services & Infrastructure Strategy, Digital and Performance Workforce & Engagement Finance			
Aboriginal and Torres Strait Islander Health Professions Workforce Strategy	Deliver an Aboriginal and Torres Strait Islander health workers and practitioners workforce strategy and implementation plan that is not limited to, but will focus on strengthening recruitment, establishing a defined scope of practice, and creating structured education and training pathways that support progression from entry-level to advanced roles.	Develop and implement a coordinated action plan outlining clear deliverables, timelines, and accountability mechanisms. The plan will include initiatives to attract and retain staff, formalise a Scope of Practice framework, and establish locally delivered education and training pathways that build capability, enable progression, and support a sustainable, skilled workforce.	Aboriginal & Torres Strait Islander Health	General Manager – North General Manager – South			

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What Matters Most: Key Aspects of Implementation

The success of the HES relies on several key factors, including community engagement, handling data issues, being adaptable, managing resources well, and communicating progress openly.

These factors ensure the strategy is inclusive, responsive, and effective in meeting community needs. Here's how we plan to achieve this:

Community Engagement

Ongoing engagement with community members, healthcare professionals, and TCHHS leadership is crucial for keeping the HES on track. We will use regular surveys and forums to gather feedback from a wide range of voices. This ongoing input ensures everyone's needs and expectations are part of our plans.

Strategic Alignment

The Implementation Plan aligns with important Qld and TCHHS strategies, including the TCHHS Strategy 2023-2027, Health Q32: a vision for Qld's Health System, and the 'Making Tracks' performance schedule. This alignment helps us manage resources effectively and work towards our health equity goals together.

Flexibility in Planning

Healthcare is constantly changing, so our plan needs to be flexible. We will regularly review and adjust the plan with key decision-makers to respond to any changes in the sector.

Reliable Data

Accurate and reliable data are essential for making informed decisions and tracking progress. We will use existing data streams and support the collection of new data to address any gaps or delays.

Resource Management

Having enough resources, including funding and staff, is vital for implementing the HES. We developed our actions, timelines, and responsibilities in collaboration with TCHHS leadership to ensure they are realistic and manageable. This partnership sets us up for success by balancing and allocating resources effectively.

Transparency and Accountability

Clear and honest communication is crucial. During yarning sessions, communities emphasised the importance of reporting back on progress and achievements. TCHHS leadership is committed to sharing updates and success stories about our progress in meeting community priorities. This transparency builds trust, ensures accountability, and keeps everyone informed.

Monitoring and Evaluation

We will set up a clear mechanism for monitoring progress and evaluating the impact of the strategy to ensure it meets its goals. Regular assessments will help us understand what's working well and where we might need to adjust.

Risk Management

Our governance will identify potential risks and challenges that could affect the implementation and outline strategies for mitigating them. This proactive approach will help us address any issues promptly.

Strengthening Health Equity Governance, Monitoring and Evaluation

Poruma (Coconut Island)

Health Equity Governance Framework

The governance mechanisms that will monitor the progress of the TCHHS HES Implementation Plan are shown below.

It is expected that updates on the progress of the HES will be made annually through the TCHHS Annual Report, as well as informally through public updates, including quarterly newsletters.

TCHHS Board

HIGH LEVEL OVERSIGHT

The TCHHS Board and the Chief executive is directly responsible to the Minister for ensuring TCHHS fulfils its functions, including the implementation of the HES.

The Board provides high-level recommendations that support progress improvements and align with legislative requirements.

TCHHS Executive Leadership Team

MONITOR PROGRESS

The Executive Leadership sponsors the implementation of HES activities.

They allocate resources to achieve the goals, activities, and KPIs of health equity.

The Executive Team is responsible for tracking and reporting progress through Cascades, the Health Service's internal reporting system used to record and monitor strategic actions. Executive update their assigned actions to ensure transparency and visibility across TCHHS. Quarterly progress reports are provided to the Board for oversight and accountability.

Health Equity Governance Committee

OPERATIONAL MANAGEMENT AND IMPLEMENTATION

The Health Equity Governance Committee provides operational leadership for the HES. This group leads the implementation and progress of the HES including review of documentation of success, challenges and enablers for implementation. Discuss potential risks, develop risk mitigation strategies including escalation. This Committee provides monthly updates to the Executive Leadership Forum.

Health Equity Working Groups (as required)

CONSULTATIVE FORUMS

The Health Equity Governance Committee will establish short-term, focused working groups to support targeted activities of the implementation of the HES. These forums are purpose-driven and convened only when required to address specific priorities. This approach ensures genuine co-design with Traditional Owners and Aboriginal and Torres Strait Islander communities, fostering culturally-informed advice, meaningful community engagement, and effective communication on key focus areas.

Health Equity Governance Framework

Roles and Responsibilities

The roles and responsibilities of the strategy are clearly defined to ensure successful implementation. The TCHHS Board, Executive Leadership, HEC, and Working Groups each play critical functions in supporting the progress of the strategy, as outlined previously. Together, these groups will endorse recommendations, allocate necessary resources, provide updates, advise on community engagement, and ensure continuous monitoring of progress.

Each group and individual assigned roles within this Implementation Plan will have clear accountability measures, with their performance and adherence to responsibilities monitored through regular reports, performance evaluations, and progress assessments.

Decision-Making Environment

The TCHHS Board holds the ultimate decision-making authority, particularly regarding strategic directions and resource allocations. Executive leadership is accountable for operational decisions related to the use of resources and monitoring progress. The governance committee and health equity working groups provide key inputs into implementation but do not make final decisions.

Risk Management

As part of monitoring of the implementation of the HES, a structured risk management process will be undertaken. Any identified risk during implementation will be appropriately flagged, evaluated, and addressed proactively. This will be done through detailed and regular reporting and monitoring.

Performance monitoring

Continuous performance monitoring is a key part to the HES's success. As part of the Implementation Plan, KPIs have been established and will be tracked to measure progress against community priorities. Regular performance reports will be reviewed by executive leadership to ensure alignment with goals and to make necessary adjustments.

Compliance

All actions undertaken as part of the HES will be done so in alignment with current TCHHS policies and regulatory requirements. Compliance checks will be embedded within the implementation process to ensure all activities meet organisational standards and any legislative obligations.



Health Equity Monitoring and Evaluation

A number of actions and success factors have been defined in the HES.

TCHHS will continue to monitor the status of these actions using KPI outlined in the Implementation Plan. Additionally, TCHHS has developed mandatory KPI to further support the monitoring of the Strategy's actions.

Co-design, Co-develop and Co-implement HES

This HES empowers Aboriginal and Torres Strait Islander voices are central in shaping decisions. It is grounded in listening to communities and working together to ensure health services and initiatives reflect community priorities, cultural values, and self-determined aspirations. As detailed in this HES, TCHHS will consult with communities and partners across the Torres and Cape regions. Stakeholder engagement examples include:

- **Aboriginal and Torres Strait Islander Governance Structure:** The new governance provides coordination to engagement with Aboriginal and Torres Strait Islander peoples and communities.
- **Health Equity Community Yarns:** Public meetings gather feedback on health initiatives, ensuring transparency and inclusivity.
- **Partnerships with Community Organisations and Local Councils:** Collaborating with local leaders and organisations helps reach all populations and address specific health needs.
- **Consumer And Community Council:** Consumer and Community Council consisting of consumers and community members, provide valuable insights to the Chief Executive on health priorities.

Working with communities from the very beginning and keeping communication open and ongoing makes the HES stronger and better able to adapt to challenges. By working side by side with communities, we can respond to immediate health needs while building lasting improvements in health equity.

Collaborating with communities creates more opportunities to co-design and co-develop health services and supports that are meaningful and effective. It also ensures that community members have a voice in shaping and providing feedback on how health services are delivered.

Reporting

TCHHS is required to provide quarterly performance reports to the First Nations Health Office, accompanied by discussions on the implementation of the HES. These reports are critical for tracking progress against the Health Equity Key Performance Measures (KPM). Each report will include updates on key achievements, challenges and community needs and partnership activities. Additionally, these discussions will focus on barriers, risk mitigation strategies, and opportunities for service improvement.

Progress Reporting

To complement quarterly reporting, TCHHS will publish an annual report, titled Year-In-Review, to provide a comprehensive overview of achievements and progress. This report will track performance outcomes based on the KPI and success factors outlined in the HES and Implementation Plan. Our measures for success are aligned with the Making Tracks towards closing the gap in health outcomes for Indigenous Queenslanders by 2033: Policy and Accountability Framework and the state-prescribed Aboriginal and Torres Strait Islander Health Equity KPM.

TCHHS Specific HES KPM

The table below and continued overleaf summarises the KPIs mapped to the focus areas across the identified priority areas. This summary provides a clear indication of when these KPIs should be monitored throughout the three-year horizon of this strategy, ensuring progress is tracked and adjustments are made to align with the strategy's objectives.

Priority Area	Implementation Focus Area	Key Performance Indicators
1	Reporting Racial Discrimination	Improved compliance and responsiveness of racial discrimination reporting systems, demonstrated through regular audits, trend analysis, and quarterly reporting of complaint outcomes and resolution rates.
	Creating Safe and Inclusive Workplaces	Increased staff participation and demonstrated improvement in awareness, attitudes, and inclusive behaviours through feedback, evaluation, and workplace culture assessments.
	Culturally Safe Recruitment	100% of recruitment processes include mandatory cultural and community-focused questions, with demonstrated improvement in culturally safe and inclusive recruitment outcomes across the organisation.
	Respectful and Unbiased Clinical Documentation	Improved cultural safety and quality of clinical documentation, demonstrated through audits showing increased use of respectful, strengths-based, and unbiased language across clinical records.
	Community Guides	Community Guides developed, maintained, and embedded into staff learning programs, with demonstrated improvement in staff cultural understanding and confidence engaging with local communities.
2	Health Equity Funding and Investment	Increased alignment of funding proposals and investment decisions with evidence-based priorities, demonstrating measurable improvements in equity, service access, and sustainability across all communities.
	Equitable and Localised Health Access	Improved equity and consistency in access to health services across communities, demonstrated through reduced service delivery gaps and higher community satisfaction with local care access.
	Accessible Virtual Care	Improved continuity and coordination of care through enhanced use of telehealth between outreach visits, demonstrated by increased follow-up rates and patient satisfaction
		Increase utilisation of telehealth for specialists and follow-up appointments, demonstrated through higher service activity data, reduced patient travel distance and improved attendance rates.
	Patient Travel and Support Services	Increased coordination and satisfaction with patient travel and accommodation support, demonstrated through feedback, improved accessibility, and continuity of care for patients from remote communities.
	Strategic Infrastructure Supporting Access and Culture	Culturally informed and accessible infrastructure projects delivered, demonstrating improved cultural safety, functionality, and community satisfaction with the design and use of health facilities.
3	Data Capability and Workforce Development	Increased accessibility and utilisation of health data across teams, demonstrated through regular use of data reports and dashboards to inform planning and service delivery.
	Community Health Profiles and Empowerment	Community health profiles published and made publicly accessible, with demonstrated use by communities, councils, and interagency partners to inform local planning, advocacy, health education, and engagement activities.
	Health Checks and Screening Access	Increased participation in community health checks and screening, demonstrated through improved early detection rates and greater access to timely, preventative care across all communities.
	Community-Led Economic Growth	Increased value and proportion of procurement contracts awarded to Aboriginal and Torres Strait Islander businesses, demonstrating strengthened local participation and contribution to sustainable regional economic growth.
	Collaborative Partnerships for Community Wellbeing	Increased number of formal partnership agreements and joint initiatives that demonstrate improved coordination, shared accountability, and collaboration to address factors influencing community health and wellbeing.



TCHHS Specific HES KPM

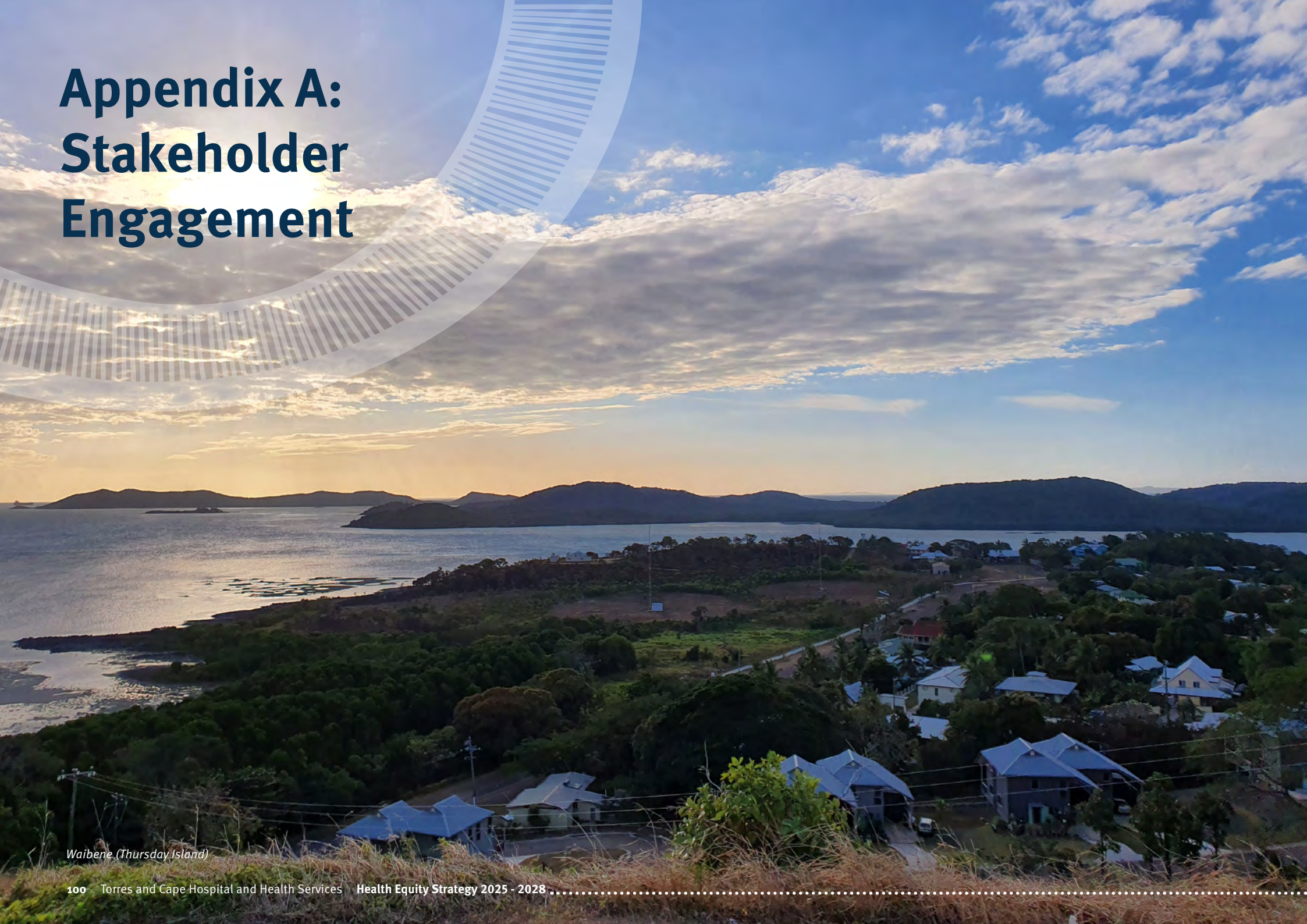
Priority Area	Implementation Focus Area	Key Performance Indicators
4	Culturally Safe Environments and Celebrations	Culturally safe and welcoming environments established across all facilities, supported by the annual calendar showcasing Aboriginal and Torres Strait Islander cultural significance dates and key health awareness campaigns, with increased staff and community participation in celebrations and events.
	Community Information and Awareness	Community awareness and understanding of available health services improves across all regions. Trust and engagement between communities and TCHHS are strengthened through timely, transparent, and accessible communication. Health facilities consistently display accurate information, and community feedback reflects increased confidence in knowing where and how to access health services.
	Cultural Practices and Policy Reform	Increased alignment of clinical and operational policies with cultural safety and human rights principles, demonstrated through comprehensive policy reviews and updates.
	Cultural Capability and Orientation	Increased participation and completion rates in Cultural Capability Training across the workforce, supported by evaluation and feedback demonstrating improved confidence and understanding of culturally safe practice.
5	Cultural Governance and Representation	Increased Aboriginal and Torres Strait Islander representation within governance structures, demonstrated through inclusive participation and stronger integration of cultural perspectives in organisational decision-making.
	Co-Design and Community Representation	Co-Design Framework developed and implemented across all teams, with documented Aboriginal and Torres Strait Islander participation and representation in program and service design processes.
	Collaborative Leadership and Community Connection	Regular executive leadership visits conducted across communities, with documented engagement outcomes demonstrating strengthened relationships, improved understanding of community priorities, and increased visibility of leadership across the region.
	Ongoing Community Partnerships for Health Equity	Ongoing and documented communication with communities demonstrating transparency and shared ownership of Health Equity priorities, with evidence of maintained relationships, regular updates, and community feedback informing implementation.
6	Employer of Choice and Career Promotion	Increased awareness and participation in TCHHS Aboriginal and Torres Strait Islander workforce and training programs, demonstrated through higher engagement, applications, and recruitment across career pathways.
	Entry-Level and Graduate Opportunities	Increased number of Aboriginal and Torres Strait Islander participants enrolled in and completing traineeship, cadetship, work experience, and graduate programs, demonstrating strengthened entry and transition pathways into the health workforce.
	Career Pathways	Increased Aboriginal and Torres Strait Islander representation in Nursing, Allied Health, and Medical Services, demonstrated through measurable growth in recruitment, retention, and progression across professional levels.
	Leadership and Mentoring Pathways	Increased participation of Aboriginal and Torres Strait Islander staff in leadership and mentoring programs, with measurable growth in Expression of Interest (EOI), management appointments, and career progression into leadership positions.
	Aboriginal and Torres Strait Islander Health Professions Workforce Strategy	Aboriginal and Torres Strait Islander health worker and practitioner workforce strategy and implementation plan delivered, demonstrating measurable improvements in recruitment outcomes, education participation, career progression, and scope of practice development.

Statewide Health Equity KPM

The Making Tracks Together: Qld's Aboriginal and Torres Strait Islander Health Equity Framework provides guidance to HHSs on meeting their legal responsibilities to ensure health equity for Aboriginal and Torres Strait Islander peoples. The statewide Health Equity KPI, developed in partnership with HHSs, track progress on these commitments and include reporting on Closing the Gap (CTG) measures. These measures also align with the broader TCHHS Clinical Services Plan, which is focused on embedding these clinical indicators into everyday practices to ensure they become standard business operations.

Priority Area	#	Key Performance Indicators	Baseline	Target
Priority Area 2	1	Decrease potentially avoidable deaths	TBD	TBD
Priority Area 4	2	Increased the proportion of First Nations babies born to First Nations mothers and non-First Nations mothers with healthy birth weights. Healthy Birth weight \geq 2500g	89.3% (2024-25)	Increase on prior year
Priority Area 3	3	A decreased rate and count of First Nations suicide deaths	Decrease on prior year	Decrease on prior year
Priority Area 2	4	Increased proportion of First Nations Adult patients on the general care dental waitlist waiting for less than the clinically recommended time	70.2% (2024-25)	85%
Priority Area 2	5	Elective Surgery – increased proportion of First Nations patients treated within clinically recommended times	100%	98%
Priority Area 4	6	Specialist outpatients – decreased proportion of First Nations patients waiting longer than clinically recommended for their initial specialist outpatient appointment	T&C is out of scope for this indicator	T&C is out of scope for this indicator
Priority Area 3	7	Increased proportion of First Nations people receiving face-to-face community follow-up within 1 to 7 days of discharge from an acute mental health unit	T&C is out of scope for this indicator	T&C is out of scope for this indicator
Priority Area 4	8	Increased proportion of First Nations people completing advanced care planning	41.3% (2024-25)	Increase on prior year
Priority Area 6	9	Annual (year-on-year) increased First Nations workforce representation to demonstrate progress towards achieving workforce representation at least commensurate to the First Nations population	22.3% (2024-25)	Increase on prior year
Priority Area 1	10	Increase the proportion of First Nations people who had their cultural and spiritual needs met during the delivery of a healthcare service (inpatient PREMS survey)	TBD	TBD
Priority Area 2	11	Integrated care pathways - Increased proportion of care pathways in place for rural and remote First Nations patients with co-morbidities (rural and remote)	31.4% (Adults) 33.3% (Child)	Increase on baseline

Appendix A: Stakeholder Engagement



Waibene (Thursday Island)

Stakeholder Engagement

The Hospital and Health Boards Amendment Regulation 2021 outlines specific prescribed persons to be engaged with as part of the development of the HES. These prescribed persons include:

- Aboriginal and Torres Strait Islander members of the Service’s staff
- Aboriginal and Torres Strait Islander consumers of health services delivered by the Service
- Aboriginal and Torres Strait Islander members of the community within the health service area
- Traditional custodians and native title holders of land and waters in the health service area, and
- Implementation stakeholders for the strategy.

The table to the right outlines the stakeholder groups engaged with as part of health equity conversations for the development of this strategy. This inclusive approach ensures that the HES is comprehensive, culturally appropriate, and efficiently addresses the specific health inequities faced by Aboriginal and Torres Strait Islander peoples and other stakeholders.



Aboriginal and/or Torres Strait Islander Staff
Aboriginal and/or Torres Strait Islander consumers
Aboriginal and/or Torres Strait Islander community members
Traditional Owners
Chief First Nations Health Officer
Chief Aboriginal and/or Torres Strait Islander Health Workforce Officer
Cairns and Hinterland Hospital and Health Service
Queensland Aboriginal and Torres Strait Islander Health Council
Health and Wellbeing Queensland
Apunipima Cape York Health Council
Northern Peninsula Area Family and Community Services
Torres Health Indigenous Corporation
Mookai Rosie Bi-bayan
Wuchopperen Health Service
Royal Flying Doctors Service
Northern QLD Primary Health Network
Torres Strait Island Regional Council
Torres Strait Regional Authority
Northern Peninsula Area Regional Council
Cape York Aboriginal Shire Councils
Local Health Service Providers



Comprehensive Community Engagement

The development and implementation of a HES for driving meaningful system change requires comprehensive community engagement across diverse stakeholders.

This approach ensures that the strategy is effective, culturally relevant, community-driven, and sustainable. To achieve this, we integrate core components like local health service design, equity-driven service delivery, and robust evaluation mechanisms.

Identifying and Engaging Stakeholders

The cornerstone of impactful system change lies in recognising and engaging the diverse groups affected by health inequities. These stakeholders include community members, healthcare consumers, service providers, policymakers, and advocacy groups. Importantly, a focus on Aboriginal and Torres Strait Islander voices ensures cultural perspectives are central to the design and implementation of the HES.

Building a Foundation of Trust and Collaboration

Establishing open, collaborative relationships fosters mutual trust between communities and health leaders. This is achieved through:

- Regular forums where communities can share their input and feedback.
- Culturally sensitive and inclusive communication that respects all voices.
- Ensuring community leadership within the process to emphasis shared ownership.

When communities feel respected and valued, meaningful participation increases, laying the groundwork for transformative change.

Promoting Inclusivity Through Shared Decision-Making

A successful equity strategy prioritises equitable influence over simple participation. This involves:

- Ensuring diverse stakeholders have meaningful roles in shaping policies and programs.
- Recognising and actively meeting cultural and spiritual needs in healthcare service delivery.
- Tailoring engagement strategies to reflect the contexts and preferences of local communities.





Taking Action to Measure and Sustain Impact

Effective engagement includes actionable steps to evaluate progress and identify areas for improvement. Key actions include:

- **Community Yarns:** Facilitate regular gatherings where feedback on the strategy is collected, and improvements are co-designed with stakeholders.
- **Workforce Survey:** Assess the confidence of healthcare providers in applying cultural safety principles and delivering equitable services.
- **Consumer Satisfaction:** Gather insights from consumers to ensure culturally safe practices meet their needs.
- **Monitoring Community Understanding:** Evaluate whether communities report strengthened awareness of the social determinants of health, fostering long-term change.

These steps ensure the strategy demonstrates not only symbolic but practical value, addressing health inequities directly at their roots.



The Benefits of Focused Stakeholder Engagement

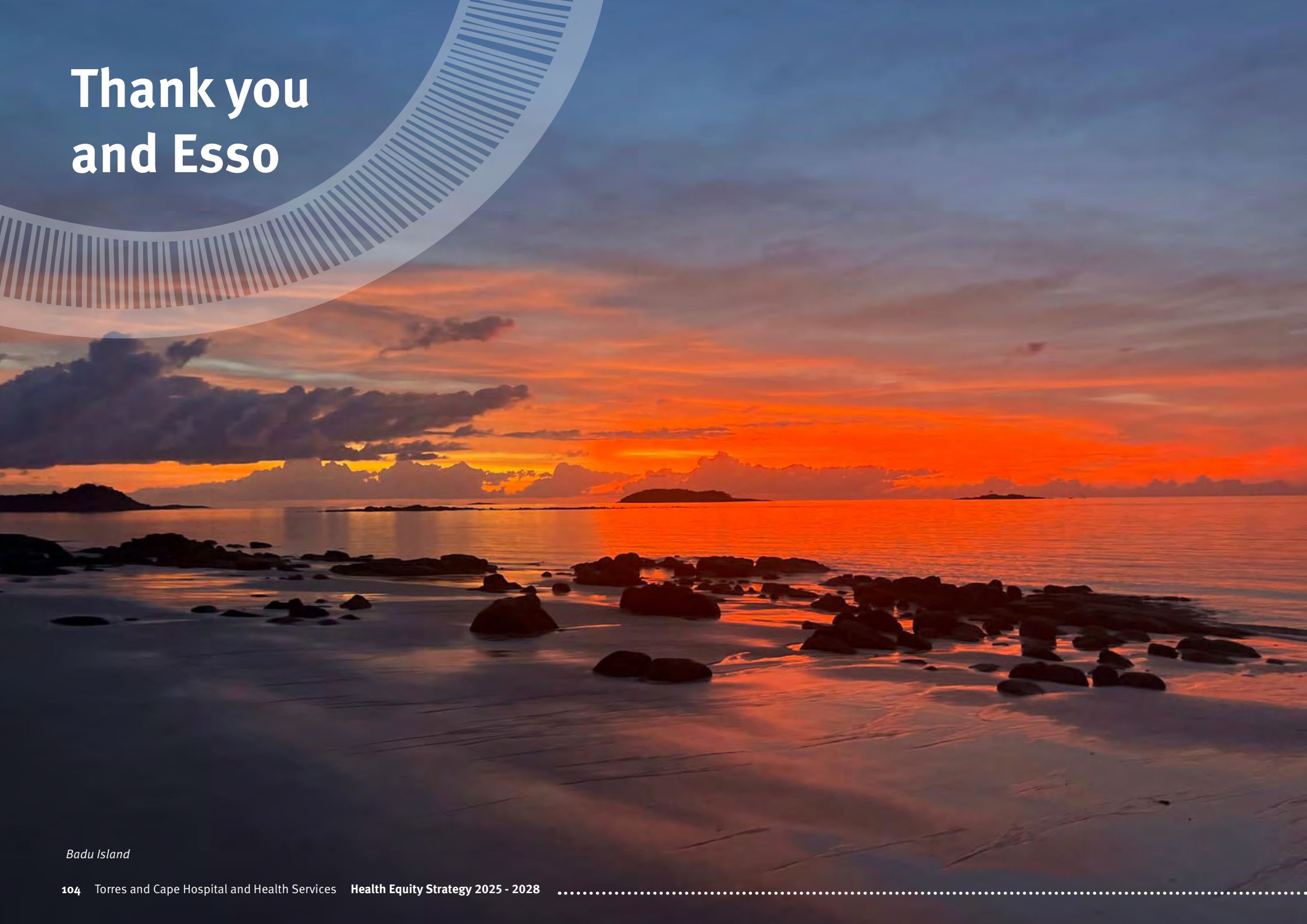
- **Stronger Health Outcomes:** Community-informed strategies lead to reduced health disparities and better health outcomes for all.
- **Enhanced Accountability:** Regular, transparent engagement holds decision-makers accountable for addressing inequities effectively.
- **Increased Cultural Safety:** A workforce confident in cultural safety practices ensures that care is both respectful and relevant.
- **Stronger Community Ownership:** Inclusive engagement fosters shared responsibility and ownership of healthcare improvement.
- **Improved System Responsiveness:** Insights from consumers and communities drive culturally appropriate service design and delivery.

By embedding cultural safety, meaningful collaboration, and community-led feedback loops into the HES, we ensure its success is more than a goal—it becomes a measurable reality. Together, we take real steps toward dismantling health disparities and achieving equitable health outcomes for Aboriginal and Torres Strait Islander peoples.



Ngurupai (Horn Island)

Thank you and Esso



Badu Island

Thank You Message from Aboriginal and Torres Strait Islander Leadership Team



LEADERSHIP TEAM

Damian Arndt

A/Director Aboriginal
and Torres Strait
Islander Health Unit

Reece Griffin

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Unit

Eva Burns

Director Aboriginal and
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Unit

We extend our heartfelt thanks to the many Aboriginal and Torres Strait Islander communities, Elders, families, health staff, and partner organisations across the Torres and Cape region who have generously contributed their time, cultural knowledge, and lived experience to the development of this HES. Your guidance and involvement have been vital in ensuring that this strategy is grounded in the realities, strengths, and aspirations of the people it is intended to serve.

Throughout this journey, we have been welcomed onto Country and into Island homes, health services, community spaces. We are deeply grateful to all who invited us to listen and learn—those who shared personal stories of strength and struggle, who challenged us to do better, and who offered local wisdom to inform the direction of this work. These conversations were not always easy, but they were always powerful. Your courage, honesty and generosity have shaped a strategy that centres community priorities and upholds the value of self-determination.

We also acknowledge the continued commitment of our health workforce—many of whom are also community members—and our service partners who have worked tirelessly alongside us.

Whether providing clinical care, administrative support, or cultural advice, your dedication to delivering culturally safe, responsive, and respectful care has laid the foundation for lasting change. This work could not have progressed without your efforts, your advocacy, and your unwavering focus on improving outcomes for Aboriginal and Torres Strait Islander peoples.

This strategy marks a significant milestone. It reflects not just a policy or a plan, but a shared vision—one built through partnership, shared truths, and trust. While we celebrate how far we've come, we remain clear-eyed about the work that lies ahead. The impacts of colonisation, systemic racism, and social and economic disadvantage continue to shape health outcomes in our communities. These are not challenges that can be solved overnight, but we believe that through strong partnerships, cultural leadership, and a commitment to action, we can create a future where health equity is not just a goal, but a lived reality.

We are proud to walk this journey with you. Thank you for your trust, your knowledge, and your leadership



Office of the Chief Executive Team

Supporting clear, culturally appropriate messaging and helping to communicate the strategy throughout the consultation journey.



Digital and Data Team

Extracting, analysing and presenting data to reflect the health needs and priorities of each community.



Project Management Team

Overseeing planning, timelines and delivery to ensure the strategy remained inclusive, transparent and on track.



Finance and Contracts Team

Managing procurement of Aboriginal and Torres Strait Islander contracts and coordinating all payments for venues and catering, across 35 remote communities. Their work ensured smooth logistics and supported the success of community consultations throughout the project.



Aboriginal and Torres Strait Islander Community Facilitators

Leading the way with cultural authority, respect and deep community knowledge, our Aboriginal and Torres Strait Islander facilitators guided local yarns and consultations across 35 remote communities. Their leadership ensured voices were heard, stories were honoured, and community priorities shaped the foundation of this strategy.



Staff Travel Coordination Team

Coordinating all travel and logistics across 35 remote communities, enabling the consultation team to reach every corner of the region.

Listening to Community Voices

COUNCILS, MAYORS, AND NATIVE TITLE HOLDERS

We acknowledge and thank the Councils, Mayors, and Native Title holders across the Torres and Cape region for their invaluable guidance and support throughout the consultation process. Your leadership has been essential in ensuring that cultural protocols, languages, and local knowledge were respected and embedded at every stage of this strategy's development.



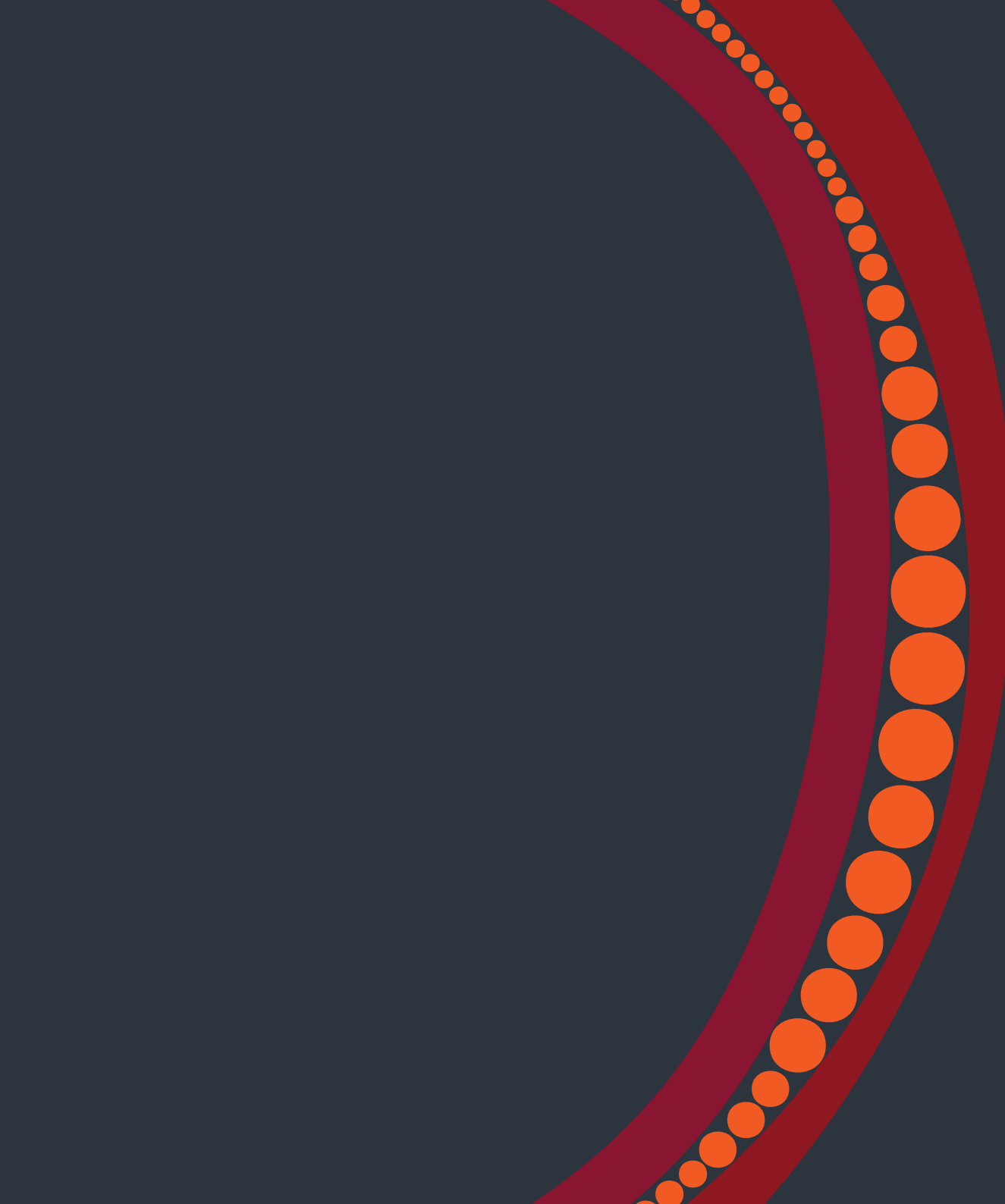
Glossary

HES	Health Equity Strategy
HHS	Hospital Health Services
TCHHS	Torres and Cape Hospital Health Services
PHCC	Primary Health Care Centre
CHHHS	Cairns and Hinterland Hospital Health Services
ACCHO	Aboriginal Community Controlled Health Organisation
QAIHC	Queensland Aboriginal and Islander Health Council
NGO	Non-Government Organisation
MOU	Memorandum Of Understanding
WHO	World Health Organisation
QLD	Queensland
AIHW	Australian Institute of Health and Welfare
ABS	Australian Bureau of Statistics
KPI	Key Performance Indicators
KPM	Key Performance Measure
ARF	Acute Rheumatic Fever
ARD	Acute Rheumatic Disease
DAMA	Discharge Against Medical Advice
PPH	Potentially Preventable Hospitalisation
ED	Emergency Department
CAC	Consumer Advisory Committee
TBD	To Be Determined
HEC	Health Equity Committee
PREMS	Patients Reported Experience Measure
PTSS	Patient Travel Subsidy Scheme

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Torres and Cape Hospital and Health Service
**Health Equity Strategy
and Implementation Plan**
2025 - 2028