



Aboriginal and Torres Strait
Islander Health Practice
Chinese Medicine
Chiropractic
Dental
Medical
Medical Radiation Practice
Nursing and Midwifery
Occupational Therapy
Optometry
Osteopathy
Pharmacy
Physiotherapy
Podiatry
Psychology

Australian Health Practitioner Regulation Agency

Public consultation

April 2019

Have your say: Consultation on the definition of 'cultural safety'

Overview

We welcome you to provide feedback on the definition of 'cultural safety'.

This public consultation is released by the National Registration and Accreditation Scheme's Aboriginal and Torres Strait Islander Health Strategy Group (Strategy Group) in partnership with the National Health Leadership Forum (NHLF) – see membership below.

We invite feedback from all interested persons and organisations, particularly Aboriginal and Torres Strait Islander individuals, organisations and health experts.

The Strategy Group and NHLF, as well as the organisations they represent, recognise and respect that cultural safety must be defined by Aboriginal and Torres Strait Islander Peoples.

The final definition will be applied in the context of the National Registration and Accreditation Scheme (National Scheme), and by NHLF member organisations, as a foundation for embedding cultural safety across the National Scheme. This includes the opportunity for using the final, agreed definition in documents such as future *Codes of conduct* for the professions regulated in the National Scheme and/or registration standards and guidelines.

To find out more about the Strategy Group and NHLF, please see the 'About us' section on page 4.

This consultation is open until 5pm Wednesday 15 May.

Background

Various terminology is used in Australia to refer to making health organisations and systems more effective for Aboriginal and Torres Strait Islander Peoples. These include, but are not limited, to:

- cultural awareness
- cultural competence
- cultural capability
- cultural proficiency
- cultural respect
- cultural security
- cultural appropriateness
- cultural understanding
- cultural responsiveness, and
- cultural safety.

These terms are often used interchangeably, used differently in various policies and strategies, and taken to mean different things to different people, organisations and jurisdictions.

The National Scheme and the NHLF have settled on the term cultural safety (see *Statement of Intent* at <https://www.ahpra.gov.au/about-ahpra/aboriginal-and-torres-strait-islander-health-strategy/statement-of-intent.aspx>).

The National Scheme has agreed that the vision is:

‘Patient safety for Aboriginal and Torres Strait Islander Peoples is the norm, and that:

- Patient safety includes the inextricably linked elements of clinical and cultural safety, and
- This link must be defined by Aboriginal and Torres Strait Islander Peoples.’

Proposed definition

The National Scheme and NHLF have agreed on a draft definition of cultural safety to be used in the context of the National Scheme and for the purposes of the NHLF and their members.

Please note, **we are not seeking feedback on a national definition** of cultural safety for all governments/jurisdictions and purposes across Australia.

Rather, we seek feedback for the purpose of the National Scheme’s and NHLF’s core business. The intention is for the new, agreed definition to provide a consistent baseline definition for use in the National Scheme.

This is the proposed definition we are seeking your feedback on:

Cultural safety is the individual and institutional knowledge, skills, attitudes and competencies needed to deliver optimal health care for Aboriginal and Torres Strait Islander Peoples as determined by Aboriginal and Torres Strait Islander individuals, families and communities.

Feedback questions

We invite your feedback on the proposed draft, and specifically your views on these questions:

1. Will having a single definition for the National Scheme and NHLF be helpful? Why or why not? Are there unintended consequences of a single definition?
2. Does this definition capture the elements of what cultural safety is? If not, what would you change?
3. Do you support the proposed draft definition? Why or why not?
4. What other definitions, frameworks or policies should NRAS and NHLF’s definition of cultural safety support?
5. Is there anything else you’d like to tell us about the draft definition?

How to provide your feedback

IMPORTANT:

We will publish the submissions we receive on the AHPRA website.

If you **don't** want your submission published, please write this clearly at the top of your submission.

To provide your views on the draft definition, please complete the [online survey](#) or email rap@ahpra.gov.au by 5pm Wednesday 15 May.

We will publish the submissions we receive as part of this consultation, as well as the name of the person or organisation who provided it. We do this to be transparent about the feedback we receive and how we incorporate, or don't incorporate, feedback and why.

We don't publish submissions that are:

- offensive
- defamatory
- in breach of a law, such as divulging private information of another person or abusive language, or
- not related to the consultation.

The consultation process

This consultation is open for six weeks and **closes at 5pm on Wednesday 15 May, 2019.**

After the consultation has closed, the Strategy Group and NHLF will consider the feedback that has been received and finalise the definition, taking in to account:

- that the definition needs input from a broad range of people but needs to be led by Aboriginal and Torres Strait Islander health leaders
- the views and feedback received, including any potential unintended consequences, and
- the relevant legislation and frameworks, particularly the Health Practitioner Regulation National Law, as in force in each state and territory, which governs the National Scheme.

We are expecting to release the final definition in May 2019, however the final date will depend on the amount and breadth of feedback received.

After the definition is finalised, we will publish a consultation report on the AHPRA website with an overview of the feedback received and rationale for taking on board, or not taking on board, feedback. **The submissions will also be published.** If you don't want your feedback published, please let us know.

How the definition will be used

Our intent is to have a national and consistent baseline definition that has been led by Aboriginal and Torres Strait Islander health leaders, which can be used as a foundation for embedding cultural safety across all functions in the National Scheme and members of the NHLF.

All entities represented in the Strategy Group have committed to supporting health equity for Aboriginal and Torres Strait Islander Peoples. The Strategy Group has identified two important goals: embed cultural safety in how registered health practitioners work, and increase access to culturally safe health services for Aboriginal and Torres Strait Islander Peoples.

To support these goals:

- AHPRA and National Boards are including specific mentions of cultural safety in documents such as standards, codes and guidelines that practitioners must meet to become and remain registered, and
- Accreditation Authorities are looking at ways they can support embedding cultural safety in how practitioners work by including specific mentions of it in the standards they use for accrediting courses.

Having a national definition of cultural safety, which can be used as a baseline across the regulated professions by AHPRA, National Boards and Accreditation Authorities, is an important but currently missing element to this work.

About us

The collaboration between the Strategy Group and NHLF represents:

- 15 Aboriginal and Torres Strait Islander peak health organisations covering 37 members
- 15 National Boards and AHPRA regulating 700,000 registered health practitioners across Australia
- 14 Accreditation Authorities accrediting over 740 programs of study nationally.

The Strategy Group and NHLF are partnering on this consultation to support a national definition of cultural safety being developed that can be used across the National Scheme and for members of the NHLF.

About the Strategy Group

The Aboriginal and Torres Strait Islander Health Strategy Group consists of Aboriginal and Torres Strait Islander health sector leaders and representatives from:

- Health Professions Accreditation Collaborative Forum
- National Boards
- NSW health professions councils, and
- AHPRA and its management board (Agency Management Committee).¹

For a full list of members, please see Attachment A.

Co-Chaired by Associate Professor Gregory Phillips, CEO of ABSTARR Consulting and Ms Julie Brayshaw, Chair of the Occupational Therapy Board of Australia, the Strategy Group provides advice on how best to develop the National Scheme's strategy, and define its role, in ensuring patient safety for Aboriginal and Torres Strait Islander Peoples in Australia's health system. The group's agreed vision is: Patient safety for Aboriginal and Torres Strait Islander Peoples in Australia's health system is the norm, as defined by Aboriginal and Torres Strait Islander Peoples.

The group is developing the National Scheme's *Aboriginal and Torres Strait Islander health strategy* and has published a shared [Statement of Intent](#) which is signed by 37 entities.

¹ AHPRA and National Boards work together to regulate Australia's 700,000 registered health practitioners. Part of this work includes setting the standards, codes and guidelines that all registered health practitioners in Australia must meet. There are 14 Accreditation Authorities in the National Scheme working with National Boards and AHPRA to accredit courses of study. They are represented on the Strategy Group by the Health Professions Accreditation Collaborative Forum.

About the NHLF

The NHLF is the national representative body for Aboriginal and Torres Strait Islander peak organisations who provide advice on health. Since its establishment in 2011, the NHLF brings together senior Aboriginal and Torres Strait Islander health leaders to consider and consult on the health policies for Australia's First Peoples.

For a full list of members, please see Attachment B.

Attachments

Attachment A Membership of the Aboriginal and Torres Strait Islander Health Strategy Group

Attachment B Membership of the National Health Leadership Forum

Attachment A

Membership of the National Scheme's Aboriginal and Torres Strait Islander Health Strategy Group (Strategy Group)

Organisation	Representative	Title
Aboriginal and Torres Strait Health Practice Board of Australia	Ms Renee Owen	Chair
Aboriginal and Torres Strait Islander Health Practice Council of NSW	Mr Christopher O'Brien	President
ABSTARR Consulting	Prof Gregory Phillips, PhD	CEO
AHPRA	Mr Chris Robertson	Executive Director, Strategy and Policy
AHPRA	Ms Eliza Collier	Northern Territory Manager
AHPRA	Ms Darlene Cox	Community Reference Group member
AHPRA	Ms Jill Humphreys	Executive Officer, Aboriginal and Torres Strait Health Practice
AHPRA	Ms Kym Ayscough	Executive Director, Regulatory Operations
AHPRA	Mr Martin Fletcher	CEO
AHPRA	Mr Michael Gorton AM	Chair, Agency Management Committee
AHPRA	Ms Anita Rivera	National Director, Communications
Apunipima Cape York Health Council	Assoc Prof Mark Wenitong	Director Medicine and Public Health
Australian Indigenous Doctors' Association (AIDA)	Ms Anita Mills	CEO

Organisation	Representative	Title
Australian Indigenous Education Project	Dr Sabine Hammond (Proxy for Pat Dudgeon)	Honorary Professor
Australian Indigenous Psychologists Association	Miss Tanja Hirvonen	Executive Support Officer
Australian Indigenous Psychologists Association	Ms Tania Dalton	Chairperson
Australian Medical Council	Ms Theanne Walters	Deputy CEO
Chiropractic Board of Australia	Ms Ailsa Wood	Board member
Congress of Aboriginal & Torres Strait Islander Nurses and Midwives (CATSINaM)	Ms Melanie Robinson	CEO
Dental Board of Australia	Ms Jacqui Gibson-Roos	Community Member
Griffith University	Prof Roianne West	Professor of First Peoples Health
Health Professions Accreditation Collaborative Forum	Ms Narelle Mills	Member
Inala Aboriginal Health Centre of Excellence	Prof Noel Hayman	Clinical Director
Indigenous Allied Health Association (IAHA)	Mr Allan Groth (Proxy for Donna Murray)	CEO
Medical Board of Australia	Dr Anne Tonkin	Chair
National Aboriginal and Torres Strait Islander Health Worker Association (NATSIHWA)	Mr Karl Briscoe	CEO
National Aboriginal Community Controlled Health Organisation (NACCHO)	Ms Pat Turner	CEO
Nursing and Midwifery Board of Australia	Assoc Prof Lynette Cusack RN	Chair
Occupational Therapy Board of Australia	Ms Julie Brayshaw	Chair

Organisation	Representative	Title
Podiatry Council of NSW	Mr Luke Taylor	President
Psychology Board of Australia	Ms Marion Hale	Community member
University of Wollongong	Prof Ngiare Brown	Professor of Indigenous Health and Education

Attachment B

Membership of the National Health Leadership Forum (NHLF)

- Aboriginal and Torres Strait Islander Healing Foundation
- Australian Indigenous Doctors' Association
- Australian Indigenous Psychologists' Association
- Congress of Aboriginal and Torres Strait Islander Nurses and Midwives
- Indigenous Allied Health Australia
- Indigenous Dentists' Association of Australia
- The Lowitja Institute
- National Aboriginal and Torres Strait Islander Health Workers' Association
- National Aboriginal and Torres Strait Islander Leadership in Mental Health
- National Aboriginal Community Controlled Health Organisation
- National Association of Aboriginal and Torres Strait Islander Physiotherapists
- Torres Strait Regional Authority.