

4 YEARLY MODERN AWARD REVIEW

ABORIGINAL COMMUNITY CONTROLLED HEALTH SERVICES AWARD 2010

WITNESS STATEMENT – DR STEPHANIE TRUST

I, **DR STEPHANIE TRUST** of c/- [REDACTED], Western Australia, state:

1. I am employed by Kununurra Medical in the position of Principal General Practitioner.
2. I am authorised to make this statement on behalf of the National Aboriginal and Torres Strait Islander Health Workers Association Limited (ACN 138 748 697) (**NATSIHWA**), in support of NATSIHWA's application for substantive variations to the Aboriginal Community Controlled Health Services Award 2010 (**Award**).

Background, qualifications and experience

3. I am a Kidja woman, and was born and raised in the East Kimberley. I identify as Aboriginal.
4. I hold a Bachelor of Medicine and a Bachelor of Surgery (**MBBS**) from the University of Western Australia.
5. In or around 2013, I completed my Royal Australia College of General Practitioners Course to qualify as a General Practitioner.
6. I have always worked in Western Australia, mainly in the Pilbara and the Kimberley while working as an Aboriginal and/or Torres Strait Islander Health Worker (**A&TSIHW**).
7. My employment history is as follows:
 - a. I commenced work in the health industry as an enrolled nurse;
 - b. in or around 1992, I became an A&TSIHW;
 - c. I worked as an A&TSIHW for the duration of my studies for the MBBS, in particular, I worked as a cadet with the Kimberley Aboriginal Medical Centre. This cadetship allowed me to come home while

studying, which maintained my connection to country while allowing me to earn more money, so that I could then go back and complete the next stage of the MBBS;

- d. in around 2006, I graduated with my MBBS. At this time, I started working as an intern, and subsequently as a resident. I worked a little bit in the country but mainly in Perth;
- e. from around 2013 to around 2015, I worked as a Medical Director of the Kimberley Aboriginal Medical Service; and
- f. in or around 2015, I began working at Kununurra Medical, which is an Aboriginal owned medical practice, where I am currently practising as Principal General Practitioner.

Kununurra Medical

- 8. Kununurra Medical is a non-for profit private medical practice owned by Wunan. Wunan is an Aboriginal development organisation in East Kimberley which aims to drive long-term socioeconomic change for Aboriginal people. It facilitates this change by providing support for education, employment, accommodation and housing, welfare reform, leadership and health services.
- 9. The connection between Wunan services and Kunnunurra Medical has allowed me to address both healthcare concerns and social determinants for Aboriginal and/or Torres Strait Islander people. For example, if I have a patient who needs housing assistance, I am able to refer them to the housing support services provided by Wunan.
- 10. Based on my experience, Aboriginal owned organisations have a leading role in rural and remote healthcare services, as they consider and address the link between health services and social determinants for health such as housing, employment and education.
- 11. We bulk bill our Aboriginal and/or Torres Strait Islander patients.
- 12. Kununurra Medical currently employs one A&TSIHW (**our Health Worker**). Our Health Worker initially began here in a receptionist role. While working as a receptionist, she expressed interest in the clinical side, so Kununurra Medical supported her throughout her training, and then employed her as an A&TSIHW in early 2019 once she had completed her training.
- 13. In addition, since I commenced with Kununurra Medical in around 2015, Kununurra Medical has employed at least one other A&TSIHW.
- 14. Our current Health Worker commenced working as an A&TSIHW in around early 2019.

15. In her position as A&TSIHW, our Health Worker performs a large number of clinical duties, and she completes much the same work that our nurses do, including blood pressure checks, blood sugar levels checks, ECGs tests, drug and alcohol testing.
16. Our Health Worker has completed her Certificate IV in Aboriginal and/or Torres Strait Islander Primary Health Care (Practice), however there has been a long delay in the Australian Health Practitioner Regulation Agency (**AHPRA**) registering her as an Aboriginal and/or Torres Strait Islander Health Practitioner (**A&TSIHP**). Therefore, we cannot supplement her income with Medicare until she is registered with AHPRA to practice as an A&TSIHP.
17. Kununurra Medical is a teaching practice, and at the moment prioritises teaching A&TSIHWs over other types of workers. This is because, from my experience A&TSIHWs are of better value to the Aboriginal community because they break down the barriers for Aboriginal people obtaining health care and Aboriginal people receive better health outcomes from A&TSIHWs, and there are already many more nurses than A&TSIHWs available.
18. Kununurra Medical is looking to move into a bigger site in approximately 12 months' time, and we are currently in the process of seeking funding to enable us to employ more A&TSIHWs. I anticipate that we will hire another A&TSIHW once our current Health Worker is sufficiently experienced to be able to operate with less supervision, so that we can then focus on training the new A&TSIHW.


Pay and entitlements for A&TSIHWs

19. I found it difficult working out what to pay our Health Worker when she started earlier this year. This is because I could find State health awards and Awards for the Aboriginal Community Controlled Health Organisation (**ACCHO**) sector, however I could not find anything that fit the private general practice sector.
20. I called NATSHIWA in around March 2019, to see if there was anything out there that I could use as a guide. When I called NATSHIWA, they were really helpful and sent through what they did have, but they said there was no national award that applied. So I have used a hybrid to determine our Health Worker's pay; I have tried to be equitable with what I offer to the nurses as well (although they are covered by their own award). We have to pay our people appropriately and value our staff, so I have had to balance all of these factors.

Importance of Aboriginal medical practices

21. In my experience, having an Aboriginal and/or Torres Strait Islander medical practice, or a medical practice that employs an A&TSIHW, creates choice for Aboriginal and/or Torres Strait Islander people because they can decide whether to obtain their primary health care from an ACCHO or private practice.

22. In my opinion, there are many benefits of having A&TSHWs employed in private practice. Mainly it breaks down barriers for Aboriginal and/or Torres Strait Islander people, enabling them to feel more comfortable and improving communication between everyone involved. This increases understanding and enables better compliance from Aboriginal and/or Torres Strait Islander patients with their health requirements and healthcare.
23. For example, I have observed that our Health Worker gives constant feedback to the clinicians on the ground about more appropriate methods of following up patients. In addition, our Health Worker and I also provide cultural safety training with all new staff when they begin.
24. From what I have observed, I do not believe that tertiary health services such as hospitals perform primary health services well. This is because the tertiary services do not address the social determinants and broader contextual issues affecting health, and therefore are not the right model to improve the health of Aboriginal and/or Torres Strait Islander people.
25. I am aware of another private practice in Meekathara, Western Australia, that is looking to start employing A&TSHWs, if it has not started already.

Signed by ..  Dr Stephanie Torst

at (place) Kununurra .

on (date) 18th June 2019 .