





Victorian Aboriginal Community Controlled Health Organisation Inc. The peak body for the health and wellbeing of Aboriginal people living in Victoria

RTO No: 20739 💝 🕮





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# Message from the Chair



I present VACCHO's Annual Report, as we reflect on 20 years of operation as the peak organisation for the health and wellbeing of Victorian

Aboriginal people. This year has been an important opportunity to look back at our journey. From the early establishment of the peak body for our community controlled health organisations, to our position today. Our Members are thriving organisations delivering high quality health and wellbeing services to our communities. VACCHO as an advocacy body has a strong voice for our Members, influencing the policy agenda at both State and National levels, advocating for the best solutions to the issues that face our communities.

In the previous 12 months we have reviewed and updated our Strategic Plan, and in the next financial year will be releasing a new strategic plan to take us into the next five years. We continue to find ways to grow and strengthen our position in support of our Members in all areas of health and wellbeing services. As the peak health body VACCHO has the ear of the State and Federal Government and continues to maintain solid working relationships with our mainstream partner organisations.

This financial year VACCHO has seen significant changes in the political environment resulting in reforms relating to the social determinants of health. We successfully repositioned to respond, ensuring our vision of health and wellbeing for our community is attainable. Now more than

ever, we seek assistance from our Members to support them and adapt to these reforms. This will strengthen both our positions ensuring we all remain viable into the future and that we are all still around in another 20 years.

In June 2017, VACCHO entered into a new funding arrangement with our national peak body National Aboriginal Community Controlled Health Organisation (NACCHO). This marks the commencement of a new relationship with NACCHO, who will now provide us with partial funding over the next three years. NACCHO is also undertaking a review of their governance, and VACCHO will watch with interest for the results of this review.

Finally, I congratulate the VACCHO staff on their continued service delivery in representing the voices and values that we share with our Members, and the principles of self-determination and community control. VACCHO's advocacy, leadership and influence in the health and wellbeing space is crucial if we are going to make a difference to Aboriginal disadvantage.

Johnny Mitchell



# Message from the CEO



Over the past 12 months, VACCHO has broadened our services and support for Members to reflect our shared definition of Aboriginal health, which includes the

social determinants of health. As co-operatives, our Members provide holistic care to their communities, including family services, housing, employment, justice, and child protection, to name a few. VACCHO has been able to adapt and respond to the changing needs of our Members across these diverse areas thanks to our hardworking team. The value of this expanded approach can be seen in the growth of our Member services, through our membership numbers. We have done this under the leadership and guidance of our Board who continue to provide outstanding governance for our growing organisation. I am also proud to report we welcomed two new Associate Members: Bubup Wilam for Early Learning Aboriginal Child and Family Centre and Boorndawan Willam Aboriginal Healing Service.

I'd like to thank our Members for the support they have shown VACCHO in the past 20 years as their peak body. Our effectiveness as a peak body is a result of the trust and support that our Members have in us. We are very grateful to them for this. Our 20 year anniversary dinner was a wonderful celebration of everything VACCHO has achieved with their support.

I thank our amazing staff, who are always willing to go the extra mile for our Members, and have demonstrated their resilience during times when workload demands are high. From time to time VACCHO senior staff are seconded to our Members to lend support and expertise when and where it is needed. This is all part of how VACCHO provides support for the future growth of our Members.

The sweeping reforms to Aged Care funding and the National Disability Insurance Scheme (NDIS) will have significant impact on our Members' business. VACCHO has committed to a huge amount of advocacy work to influence the national policy agenda and assist our Members to prepare for these initiatives. One highlight was our great success in influencing the Productivity Commission's recommendations to Government regarding funding arrangements.

These are a few examples of VACCHO's many achievements this year. VACCHO believes there is room for improvement to enhance the health and wellbeing of Aboriginal people. VACCHO will continue to lead the sector, and work with our Members towards Closing the Gap and achieving health equality for our mob.

Jill Gallagher AO



## Introduction

VACCHO is the peak body for the health and wellbeing of Aboriginal peoples in Victoria. Aboriginal culture is ancient and contemporary, dynamic and strong, vulnerable and valuable. Our Members' cultural identities are an important source of strength and inform our ways of working and integrity.

We are a member based organisation, and our Members are Aboriginal Community Controlled Organisations (ACCOs) providing health and wellbeing services to the Victorian Aboriginal community. We use the Aboriginal definition of health\* to define our health care to our Communities.

For VACCHO, our cultural identity as Aboriginal people is central to our understanding of ourselves, and our health, and we believe our health outcomes will improve if self-determination is at the core of VACCHO's policies and programs. When Community visits their local ACCO, holistic care is provided in a setting that is imbued with culture. It is not just a visit to the doctor, it is a gathering place that provides a sense of belonging and connection. The intangible nature of this cultural safety that ACCOs provide is the most valuable part of their service. This is the message that we deliver to our partners in the mainstream, and that we embody in the work we do.

### Our core business

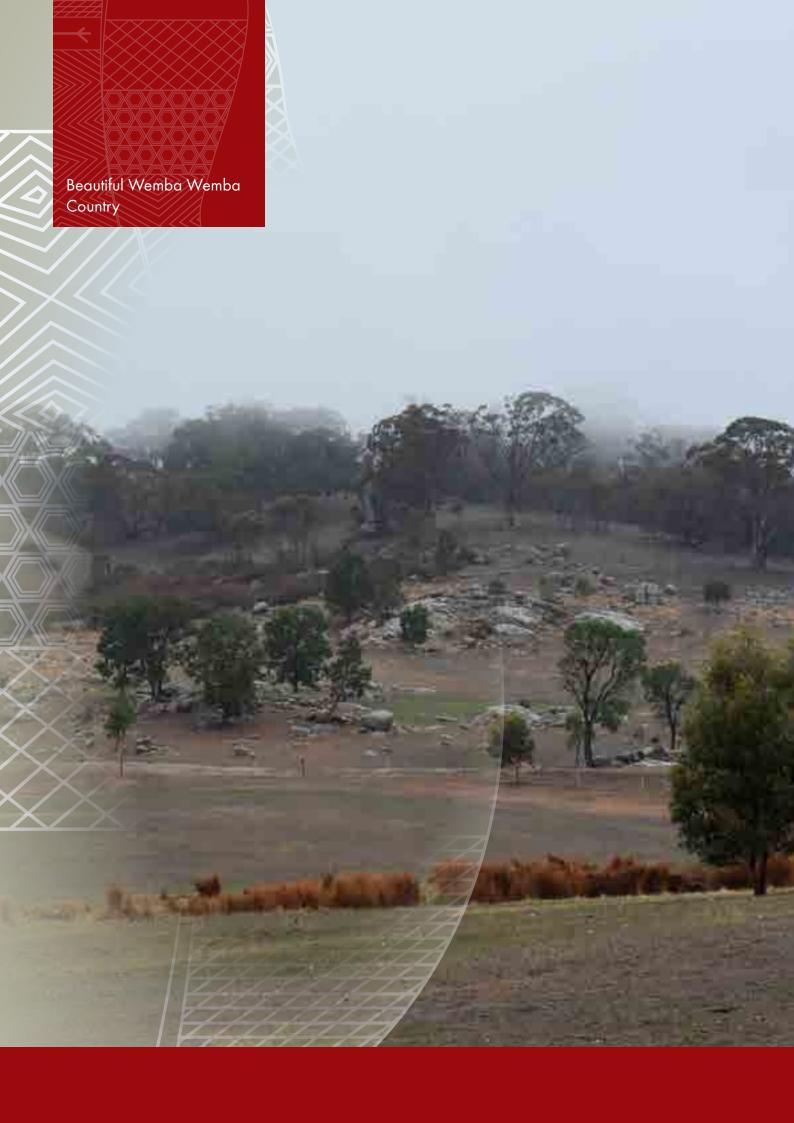
At VACCHO our service delivery is underpinned by the vision shared with our Members: to achieve health equality for our mob. This means supporting Members to provide quality services outside of primary health care, to include housing, employment, education, justice, mental health and family services. This holistic approach to health and wellbeing ensures ACCOs provide services to the Community that address the areas underpinning the

social determinants of health. VACCHO is also committed to working for the health and wellbeing of Aboriginal Victorians through improving their access to culturally appropriate care, whether through mainstream or other Aboriginal service providers.

To become the best service providers for Communities VACCHO supports our Members through advocacy, training and resource development. We are a complex, and diverse organisation with a variety of service delivery support programs. VACCHO seeks new partnerships, challenges and improved ways of responding to Community needs.

VACCHO works with mainstream organisations to reinforce who our Communities are, how they access services, and to advocate for Communities' improved access to those services. VACCHO has a notable reputation with these mainstream organisations, participating in relationships that are genuine and respectful to the aspirations of Aboriginal Victorians.

Given the broad variety of service areas VACCHO supports, it is vital to maintain strong relationships with Communities, and be open and responsive to their needs. VACCHO's connectedness to the priorities of our Communities is central to our core principles of self-determination and community control. We do this through our Members. Mutual trust and respect from our Members allows us to react quickly to announcements from Government in policy reform and decision making. VACCHO has built a strong reputation with Government and key stakeholders as the reasoned voice of our Members and their Communities.



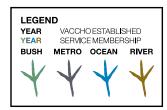
# Membership

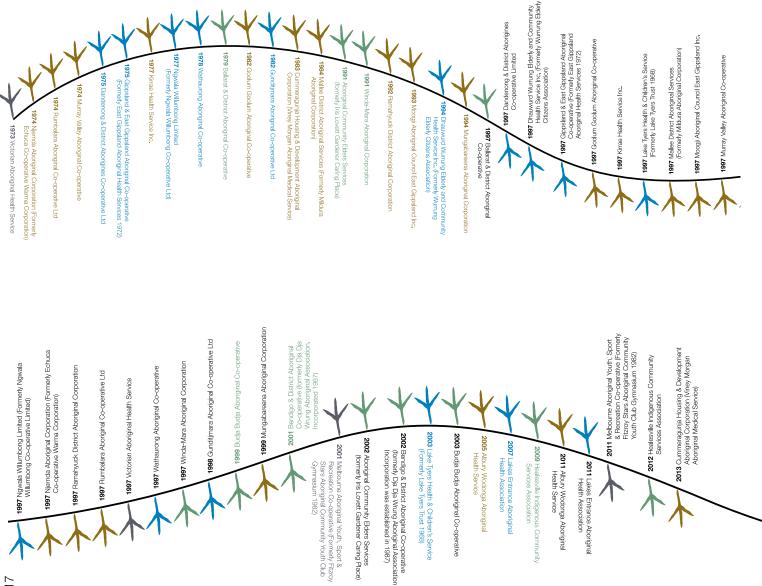
VACCHO's Membership represents the foundational principle of Aboriginal community control and holistic health care. This principle is simple: Community make decisions for themselves and their communities, as it is the best way to meet their needs and improve the outcomes for those communities; be it in education, justice, employment, health, or any other part of their lives. VACCHO was established in 1996 because a need was identified by Victorian ACCHOs for a peak body to advocate for them with the united voice of the Victorian community controlled health sector. There was a need to influence the policy agenda around Aboriginal health, and ensure we had a say in the decisions being made about our Community: it needed to be Aboriginal health in Aboriginal hands.

Twenty years later, VACCHO Members have grown from community organisations with a handful of staff, to Members who are now large, high performing organisations, employing large numbers of staff who provide a complex variety of services. Our full Members are vibrant and diverse organisations that deliver culturally appropriate primary health care, as well as childcare, family and employment services, housing, justice, and all aspects of health and wellbeing. Our associate Members are organisations that share our vision to deliver quality services to improve the health and wellbeing of Aboriginal Victorians according to the Aboriginal definition of health. To ensure their sustainability long into the future, all of our Members are now positioning themselves as businesses. VACCHO has responded to this growth by expanding our capacity in areas of training and development, advocacy, health research and evidence, health promotion, engagement with community, government and stakeholders, and in business support.

Today, VACCHO has 23 full Members and 7 Associate Members. These Members operate in metropolitan, regional and rural Victoria, and provide our Communities with access to high quality, culturally appropriate services. We have seen our membership grow, with the addition of two associate Members this financial year, which is a demonstration of the value that VACCHO provides our Members.







### **Newest Members**

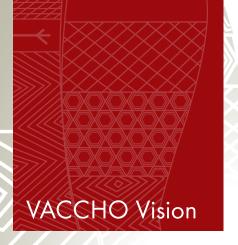
2016 Weenthunga Health Network

2016 Bubup Wilam for Early Learning Aboriginal Child and Family Centre

2016 Boorndawan Willam Aboriginal Healing Service







VACCHO is committed to providing the highest quality service to our Members, partners and stakeholders through the continuous review and improvement of services. In respect to the goals and principles of community control within the Victorian Aboriginal health sector, it is essential we ensure that the services VACCHO provides meets the needs of its Members, stakeholders and ultimately the community that we serve.



Our strategic plan outlines VACCHO's strategic priorities for achieving improved health and life expectancy outcomes for Aboriginal Victorians.

The sustainability of VACCHO is underpinned by our strategic objectives, with a commitment to:

- retain and grow the level of commitment from Government
- explore business opportunities for the future growth of VACCHO.

# **GOAL 1 Aboriginal cultural qualities**

To implement a range of activities that express the diversity of culture in Victoria's Aboriginal communities and to demonstrate this in the daily operations of VACCHO.

VACCHO is informed by our culture in all of our communications with Members, Community, and key stakeholders. It is only through understanding our diverse cultures that we can work effectively with our partners in mainstream organisations to achieve health equality together.

VACCHO has demonstrated the value of culture and cultural understanding through the continued success of our Cultural Safety training programs. In addition to providing cultural safety training, we developed a new program, titled Managing Aboriginal Peoples and Programs, specifically tailored to Executive management and Human Resources officers. The Cultural Safety team has delivered training to approximately 1,300 participants across the State, in 94 sessions delivered to more than 60 organisations and services. Through these programs VACCHO is building a bridge of understanding between Aboriginal people and health and wellbeing service providers.

In April 2017, VACCHO was involved in the 15th World Congress on Public Health in Melbourne, as the hosts of the First People's Networking Space. This space was celebrated at the conference as a culturally safe place for First Nations' delegates to network and engage with each other, and with other conference delegates. Celebrated by the World Congress, it was a space of respectful engagement and dialogue. The establishment of an Indigenous Working Group within the World Federation of Public Health Associations, and a commitment to continuing the presence of a First People's

Networking Space at future conferences were just some of the outcomes of this event.

The First People's Networking Space was a huge success. Delegates were visibly moved by the Space, and the program, which included weaving, performance, and yarning circles.

VACCHO welcomes involvement in similar networking spaces in the years to come.

This financial year, VACCHO has delivered Cultural Awareness training to:

- the Arts
- local Councils
- **Public Health Networks**
- **Correctional Officers**
- Justice Health Workers
- Monash University
- La Trobe University
- **Deakin University**
- Magistrates Court of Victoria
- Department of Health and Human Services
- St Vincent's Hospital
- Peninsular Health Community Health
- Commission for Children and Young People
- **Australian Catholic University**
- **National Disability Services**
- **Royal Flying Doctor Service**
- Ambulance Victoria.



# VACCHO Annual Report 2016-17

# GOAL 2 **Quality workforce**

To support the development of a creative, knowledgeable, skilled, experienced and committed workforce throughout mainstream and Aboriginal Community Controlled Organisations.

This financial year VACCHO has built upon its work targeted towards building the capacity of the staff at ACCOs and other health services, by providing training and professional development workshops, and networking opportunities.

In September 2016, VACCHO became accredited with the Australian Health Practitioner Regulation Agency as a provider of the Certificate IV in Aboriginal and Torres Strait Islander Primary Health Care Health Practice. VACCHO is the only Registered Training Organisation (RTO) in Victoria to offer this training, which allows Aboriginal health workers to become registered Aboriginal Health practitioners, and have their skills and experience recognised. We provide an affordable and culturally appropriate way for our workforce to access this training, and further their career options. We have already had two student intakes this year, who will graduate in 2018.

VACCHO also supports the Aboriginal Drug and Alcohol workforce through the provision of support, training and resource development. Providing greater support to these workers has been so important to the holistic approaches to health that VACCHO advocates. The links between Drug and Alcohol issues and Mental Health are well understood, they go hand in hand. This year, we successfully lobbied to have Drug and Alcohol sector funding realigned to be supported as a single sector by both Commonwealth and State funding. This promotes better strategic planning by VACCHO

and our Members' services in the Social and Emotional Wellbeing sector. After that announcement, we saw the largest attendance in six years at our Social and Emotional Wellbeing gathering in November 2016, with 92.5 funded positions from the Drug and Alcohol workforce attending over the two days.

Building on earlier work completed in the last financial year, a series of National Disability Insurance Scheme (NDIS) capacity building workshops occurred on November 2016 and March 2017. The purpose of delivering these workshops was to help our Members better understand the implications of the NDIS' individualised funding model to our Members. This was essential work to prepare our Members for the challenges of becoming NDIS registered service providers. We ran workshops across the State attended by representatives from 11 of our Member organisations.

We continued our successful Accreditation Support and Development program, which provides tailored support for our Members through the accreditation process. Our staff assists Member services to achieve the various accreditation requirements through working with them to identify gaps, develop action plans and prepare for the accreditation process. The increase in the number of standards being imposed on Members is burdensome. VACCHO and our Members are committed to developing this growth area to manage and coordinate the multiple accreditation requirements. Ten Members have so far achieved their accreditation status. Cont' next page



A vital part of VACCHO's support for our Members is in our governance training. It is vital that our Members' services can operate as high performing organisations, allowing them to focus on delivering quality services. VACCHO's governance training helps our Members to operate efficiently and effectively. We also provide Community with Board and governance training, to further career opportunities. This year VACCHO received funding to develop accredited training units that could be applied to the Certificate IV in Business (Governance) and the Certificate IV in Business Administration. These will commence delivery in the next financial year. We have also begun work developing a pilot Governance Pathways Program, to prepare Community to join and participate on mainstream Boards.

### Governance and organisational support

VACCHO and our Members have grown up from small services with a handful of staff, to large, complex and diverse organisations. With that growth has come a large administrative burden on our Members. Through our Governance training and accreditation support programs, VACCHO is assisting our Members to develop strong governance and robust systems, so that they can function as high performing organisations and deliver their unique brand of holistic health care to their communities.

We are often asked to help our Members when they are at their most vulnerable, we beieve this is because of the trust and respect that exists between us. We recognise the challenges that our Members face, and can provide a holistic approach in supporting them. Our governance and Board training was developed to help Community Board members and Community members who are interested in governance, understand what makes a strong organisation. We also provide our Members with individualised support in policy and procedure development, strategic planning, and mentoring and coaching for Board members and executive staff. VACCHO also provided important resources and support through the Vital Signs

program. We offer one-on-one support in any of the areas identified by our Members, to help strengthen their systems, practices and documentation. All so they are able to meet their accreditation requirements, and achieve best practice in their services.

In the past year VACCHO successfully tendered to deliver Foundations in Governance programs, designed to assist current and prospective Board members to learn more about the roles and responsibilities of boards in ACCOs. These programs, funded by Aboriginal Victoria, have been well received by participants and are clearly meeting a demand in Communities. In this financial year eight programs were delivered to more than 100 participants from a wide range of backgrounds and experience. A highlight was the program targeting young people aged 18-25. This program was well attended and facilitators were impressed with the caliber of participants, our future leaders. These programs are just some of the ways that VACCHO supports our Members and our mob. This support is highly valued, and its success is demonstrated in the outcomes that VACCHO and our Members are able to achieve.





# GOAL 3 **Quality services**

To build upon the capacity of our Members and partners to deliver culturally appropriate healthcare services to the Victorian Aboriginal community, and to use our strengthening network to influence providers of programs that address health needs in accordance with social determinants. Through these objectives, VACCHO will ensure that we meet the diversifying needs of our Members, stakeholders and communities.

VACCHO believes that Aboriginal health is everyone's responsibility. Aboriginal people have the right to access culturally appropriate care from the service provider of their choice. VACCHO is committed to developing resources, supporting future growth and strengthening partnerships. This strategy ensures that all health and wellbeing service providers are able to deliver quality, culturally safe services to Victorian Aboriginal peoples.

This year, VACCHO and two of our Members were featured as best practice case examples in the DHHS interim evaluation of the national Tackling Indigenous Smoking (TIS) program. This was developed by Cultural and Indigenous Research Centre Australia (CIRCA) and published in June 2017. This achievement recognises the work VACCHO and the Victorian ACCOs are doing in this area. The study relating to VACCHO's work describes our collaboration with Members to record and access data on Aboriginal smoking rates. This led to us being able to identify that the TIS program had reduced smoking rates in our community by 2% per annum statewide.

VACCHO became a member of the Rethink Sugary Drink Alliance (Alliance) in 2013. We collaborated with Cancer Council Victoria to establish the Aboriginal Rethink Sugary Drink project, which is a multi-format campaign

including social marketing, which resonated with our Communities and sent the important message to 'drink water'.

In December 2016, VACCHO were finalists in the Australian Marketing Institute (AMI) Awards, in the Social Marketing and Social Change category, and won the AMI Victorian award for this campaign. We launched the 'Sports Drinks are Gammin!' campaign in July 2016, with ads featuring local sports role models across football, boxing and gym workouts.

During September to December 2016, we ran the Aboriginal Rethink Sugary Drink 'Sports Drinks are Gammin!' ad on a regional television network, and a selfie competition using the hashtag #DrinkWaterUMob, which reached 22,666 people through our social media platforms. This social media campaign was one of VACCHO's most successful, and the message has been heard in communities across Victoria. The message is even having an impact with mainstream audiences and interstate audiences. The Rethink Sugary Drink program is an important example of how VACCHO works in collaborative partnerships with mainstream organisations, and we were happy to be involved in a co-production model, a true partnership, not just a gammin one!

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This year we also launched Yarning about Breastfeeding: Celebrating our stories; a collection of stories from mothers, fathers and grandparents about breastfeeding experiences, with key information to help promote the importance of breastfeeding our young boorais. VACCHO's role is to support our Members to deliver the best possible services to their communities. This means creating the evidence base, resources, and training support for the workforce to take this information and deliver it to the Community.

Yarning about Breastfeeding was written in response to the research recommendations of the Feeding our Future report from 2011, and evidence based research undertaken by Monash University dietetics students in partnership with VACCHO. Real stories and experiences from Community makes the book more relatable, giving it a better chance of reaching families. VACCHO led by example with the introduction of a Breastfeeding Policy at VACCHO. This is an example of how a research need was identified by one of our partner organisations, facilitated by VACCHO with Community input and consultation.

### **Health Evidence dashboards**

For VACCHO the importance of having evidence, and evaluating programs, has become increasingly apparent. In response we have invested in data collection and analysis through our Health Evidence Team. By collecting the Members' data in key identified areas, we can then clearly illustrate what that data is showing.

Before this initiative, data was only available nationally through the Australian Bureau of Statistics, and in Victoria we found that this data was particularly unhelpful. Often we were aggregated as a part of south east Australia, or there was inadequate data for demonstrating the problems and challenges faced at a community level. Aboriginal peoples who access our ACCOs are really the most in need and vulnerable. They can carry a lot of risk factors and this can skew the data. Victorian ACCOs need their own data collected and analysed so that it properly reflects the realities of their communities' health. The data that we collect from ACCOs shows a very different picture about the health and wellbeing of our Communities than the National data, hence the importance of this program.

Now with access to data from our Members across the State, VACCHO is able to develop a better understanding of the

trends and statistics of our Communities health. The Health Evidence Team is able to produce dashboards analysing data trends and comparisons, producing visual representations of the health statistics from our Member organisations. With one page posters we easily illustrated valuable information for Members that demonstrated how they were performing, or how the health of their Communities is improving. Dashboards are provided on request and for regular reporting cycles, and can be produced to show data and trends for individual ACCOs, regional areas, or the State. ACCOs can always access their own data through the data sharing platform, and they will often request dashboards from us, particularly if they would like to see their own data compared against a statewide data set. Dashboards are also produced for VACCHO Improvement Cycles, which are identified by Members and focus on a particular area of health service delivery.

VACCHO will continue to lead this project and work with the members towards developing powerful evidence when we advocate for our Members' needs. We will continue to prove that Aboriginal Community Controlled Organisations make a difference in the health outcomes of their Communities.





# GOAL 4 **Quality infrastructure**

### To secure the human and capital resources necessary to sustain and enhance the activities of VACCHO and our Member organisations.

2017 saw the conclusion of the Human Resources (HR) Capacity Building three year project, which aimed to build the HR knowledge and skills within our Membership. This project was about finding people, connecting people, and building on their skills, knowledge and experience, so that our Members had the appropriate resources to manage and support their workforce. An important aspect of the project was building a community of practice, a network between HR staff in Member ACCOs, to allow for knowledge sharing and peer support. We also had HR forums, which ran for two days, and were great for professional development and for building this network across ACCOs. This financial year we also offered additional training opportunities including Investigations training, WorkCover training, and a Certificate IV in Workplace and Business Coaching.

While the original funding for additional support and human resources has now expired, the positions that were created as a result of this project are now almost 100% self-funded by the ACCOs. Demonstrating the value of these positions and the work that HR staff are doing, including improved recruitment and retention practices, staff support, and staff professional development. This project epitomises VACCHO's role as a peak body. It was about supporting Members and building their capacity to do HR better. If we have high performing ACCOs, they are going to deliver a better service to their community.

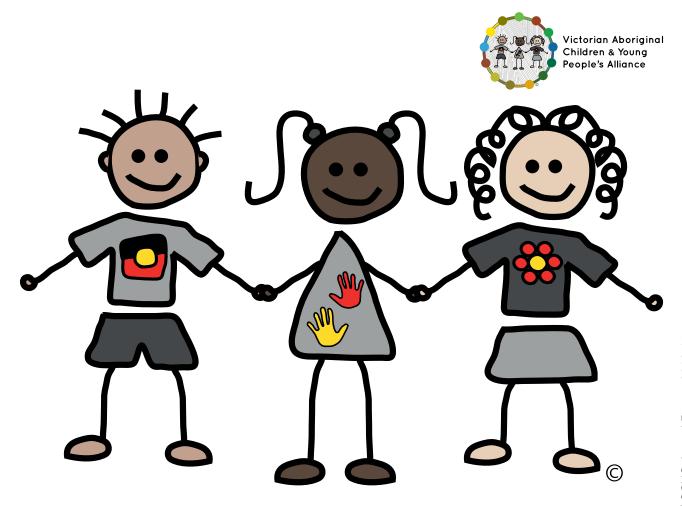
Another ongoing VACCHO project to support our Members to minimise risk and find efficiencies in their back of office operations was the Shared Business Services model, which is a solutions based offering for our Members' Information, Communication and Technology (ICT) needs. VACCHO also established a shared finance solution, as well as the existing hosted services solution. Through this hosted service resource, Members have all of their ICT needs covered, with a help desk, system security, backups and any other ICT support they require. Our model has been recognised by overseas companies as an international example of best practice. Several other interstate not-for-profit companies have also looked at the example that VACCHO has set. VACCHO is helping the ACCOs transition and adapt in this competitive funding environment, by reducing the back-ofoffice running costs, so that they can focus on delivering high quality health services to their Community. Seven members are now involved in this shared services platform, and the system supports more than 600 staff in these ACCOs. As a side benefit, this business model supports Aboriginal employment opportunities.



### Skill sharing

VACCHO continued to auspice the Victorian Aboriginal Children and Young People's Alliance (the Alliance), to support 13 of our Members in their work advocating for better outcomes for Aboriginal children in out of home care. The Alliance has successfully advocated for the importance of Aboriginal children to be in Aboriginal hands, and the reforms and funding that have flowed to our Members as a result of this work have had a huge impact on the sector. Providing our ACCOs with many opportunities to improve their services for their kids through these new funding opportunities.

We successfully secured funding through the NDIS Information, Linkages and Capacity Building (ILC) stream to deliver a program to build Members' awareness and capacity to meet the needs of people in their communities who have a disability. Three of VACCHO's Member organisations - Rumbalara Aboriginal Co-operative, Ramahyuck District Aboriginal Corporation and Bendigo District Aboriginal Cooperative collaborated on a successful project proposal to the NDIS ILC Readiness Grants. The project funded through this process will build the capacity of these ACCOs, and guide mainstream health and community services in providing more inclusive and responsive services to Aboriginal community members who have a disability.



Hon. Lisa Chesters MP, BDAC CEO Raylene Harradine, BDAC Chair Uncle Barry Fary, Aunty Barb Gibson-Thorpe and Hon. Jacinta Allan MP at the launch of Bendigo and District Aboriginal Cooperative Stage 1





# **GOAL 5** Quality policy and advocacy

### To influence government policy and stakeholders to directly address the health needs of Aboriginal people in Victoria.

One of the key services we provide to our Members is the provision of advice to policy makers. We guide them in how to develop policies that will actually work to improve the health and wellbeing of Victorian Aboriginal Communities. We sit on more than 75 different steering committees, expert panels and boards, taking the priorities and views of our Members into these forums and representing their voice at the table at both the State and National level. VACCHO also develops partnerships with many peak bodies and Statewide organisations that function in the allied sectors of the social determinants of health. One example is our partnership with Aboriginal Housing Victoria, to allow our Members to make their housing options more sustainable in the future. Over the last year VACCHO was focused on broadening our agenda to include all of the social determinants of health.

In the National policy space, there are several funding reforms that threaten safety nets for Aboriginal people. Through our continued relationship with DHHS, VACCHO has ensured our Members' voices are heard at the National policy table through our influence with members of the standing committees of the Australian Health Ministers' Advisory Council, and the Council of Australian Governments (COAG) Health Council. By making our priorities and recommendations clear to DHHS, we have seen that the policy priorities of VACCHO's Members have reached the ears of the Federal decision making bodies. The evidence of this influence in the communication was apparent at the COAG Health Council. The results

of our advocacy was also reflected in the Productivity Commission's recommendations to Commonwealth Government for the funding of social welfare services. VACCHO called on the Productivity Commission to halt the expansion of individualised funding of community services and added our voice to the many community service organisations concerned for the impact of this funding model on vulnerable communities and community controlled organisations. The Productivity Commission asked VACCHO to explain our position at a public hearing, to further explain our position on these funding changes and the impact they will have on Communities.

Our relationship with State Government is also demonstrated through the participation of VACCHO in numerous co-design policies. The State Government is now working towards reformulating all of its agencies' new policies under the co-design principle - by Aboriginal people, for Aboriginal people, and in the recently released Aboriginal Health, Wellbeing and Safety Plan, we saw 100% or our recommendations included in the final version of this strategic document, demonstrating the value that Government sees in VACCHO's contributions in these processes.

VACCHO has also continued our leading role in aged care advocacy. VACCHO has a staff member as the NACCHO representative on the National Aged Care Alliance, and through that forum, we advocate for an adequate safety net for Aboriginal Elders needing Aged Care services.

### **Responding to Government change**

The Federal health funding model has also seen significant proposed changes this year. VACCHO has worked on a NACCHO committee with Commonwealth Health (the Funding Model Advisory Committee) to develop a new funding model for the Indigenous Australian Health Package (IAHP) funding. The IAHP will change health funding from block grants to health services, to a competitive, performance based funding model, which is a huge challenge for our Members. VACCHO is advocating on behalf of Victorian ACCOs to get the best outcomes for our Members, and ensure that the impact on their services is minimal in that transition. The model is still in development, and we are working tirelessly with the decision makers and our Members to make sure they are prepared for when the new funding model is brought into effect.

VACCHO has undertaken significant work in the space of Family Violence. In response to the outcomes and recommendations of the *Report of the Royal Commission into Family Violence*, released last year, VACCHO ran a forum for our Members. The Forum was used to explain all of the Family Violence reforms, the impacts and opportunities for ACCOs, and to do some strategic thinking about how to harness these new funding streams to maximise the services being delivered to Community.

VACCHO supports The Alliance in their advocacy around Out of Home Care

reforms in the State Government. The Alliance worked closely with the State Government on these reforms, with many positive changes coming out of them this year. The changes have been overwhelming for the sector, but The Alliance members supported one another significantly, to enable greater responsibility for delivering Family Services. The Alliance staff located at VACCHO have continued to provide grassroots advice in developing a new system architecture for the children and families service system in Victoria. In recognition of this, the DHHS has funded VACCHO staff members to support the members of the Alliance to continue their strong work in facilitating consultation with Community and working with Government on the design and implementation of these reforms. Most significantly, The Alliance has advocated for the need for Aboriginal children in Aboriginal hands. This has led to the transition of Aboriginal children from mainstream Out of Home Care services and DHHS, back to Aboriginal organisations. We have also seen the transfer of funding to Aboriginal agencies to do the care and case management of children in Out of Home Care. Now our Members are looking after their own Communities, and can provide care to those families in their holistic, wraparound way. This gives their families' connection to Community, Country and Culture, giving them the best chance of getting out of the system, and getting children back home.



### Aged Care and NDIS – Individualised funding, a paradigm shift

A few years ago the Government started to experiment with the idea of providing individualised funding packages. Aged Care was one of the first service areas that introduced this form of funding. Clients are assessed individually, and are assigned a level of package based on their needs. They then have the choice of which provider to use, paid for through their package. The providers are no longer block funded directly from Government, but receive payment for the services they provide. This individualised funding model is considered by the funding bodies to be efficient and cost effective, but it does not resource the work that our Members do in making mainstream organisations culturally safe and assisting Community members to navigate the service system. This threatens the holistic model that is central to our Members approach to health care delivery. It leaves Aboriginal people more disadvantaged than they already are, and it is not designed for the more vulnerable members of society.

In recent years, we have undertaken research with our members that provide Aged Care services (now 21 organisations) to understand the impact these major sweeping reforms will have on their services and funding arrangements. Through this work, VACCHO has developed a deep understanding of the area and has

advocated on behalf of our Members at a National level to minimise this impact, and to enable equitable access and service outcomes for Aboriginal people who need Aged Care supports. Since 2013, VACCHO has been the NACCHO representative on the National Aged Care Alliance, an alliance of providers, consumer organisations and workforce representatives who have banded together to lobby the Government around these reforms.

VACCHO's ongoing work in this policy space has made us an important advocacy voice for Aboriginal Communities in the areas of Aged Care and Disability. Given the similarities in how these two areas are being restructured, it made sense for VACCHO to advocate on both of these advocacy areas, and enable our Members to have their voice heard in this space. This has been recognised by the State Government, who now fund us to work in both of these areas so that the process is streamlined and complementary, supporting our Members to be ready for the new service landscape as the reforms are implemented. We have undertaken significant work with our Members to prepare them for the paradigm shift they will need to make in transitioning their services to operate as businesses, to ensure their sustainability in this future funding environment.



# WACCHO Annual Report 2016-17

# GOAL 6 Quality partnerships and networks

To improve the accessibility and quality of Aboriginal health services and programs through the development of partnerships and networks with key organisations.

One of VACCHO's key strengths is the partnerships we have forged with our Members, Government, stakeholders, and with allied organisations, both in the Aboriginal and mainstream health and wellbeing sectors.

This year VACCHO has expanded our support to The Alliance, with another funded position in our Policy and Advocacy Unit. This relationship demonstrates VACCHO's commitment to supporting our Members and to building networks with other key organisations. The Alliance has built an excellent relationship with the Centre for Excellence in Child and Family Welfare, which is the peak body for mainstream community services organisations. This relationship has had a flow on effect to the ACCOs and mainstream community service organisations, who are now building working relationships locally. These partnerships are vital to ensuring mainstream services are more inclusive and culturally safe, and engage with the care of Aboriginal children.

We have also strengthened our relationship with Dental Health Services Victoria (DHSV), and VACCHO hosts an Aboriginal Community Liaison Officer, employed by DHSV, for two days a week. The Community Liaison Officer provides support to our Members and identifies funding to deliver improved dental health services in ACCOs.

A Memorandum of Understanding between VACCHO and the Royal Flying Doctors Service (RFDS) to access telehealth platforms has allowed ACCOs to set up online consultations between the health clinic and specialists with ACCO staff trained by VACCHO and RFDS.

VACCHO's relationships with mainstream peak bodies and statewide service providers have immediate and positive impacts for the Members, helping them to provide better health care to their Communities.

As a well-established and diverse organisation, VACCHO is able to support other Aboriginal organisations and committees by offering the use of VACCHO infrastructure to these smaller groups. Through these partnerships, VACCHO is supporting our Communities and gaining the benefit of a close relationship with these other groups, including Weethunga Health Network (a network of allied health professionals), and the Victorian NAIDOC committee.

Our Members' profile was widened through VACCHO social media networks. Social media now shares our messages with more than 4000 people. Our social content streams are linked to provide immediate 'voice' across all our platforms. VACCHO's use of these platforms allows VACCHO to advertise employment opportunities and training events to a wider reach of Community members.

Our Community networks are also strengthened through Yarnin' Health, VACCHO's award winning weekly radio and online program. Yarnin' Health shares messages and stories with Communities and health services to link them with their local ACCO. Yarnin' Health is VACCHO's grassroots approach to networking Community through culture, healthcare and story telling.





# GOAL 7 Sustainability

We aim to expand the diversity of our income sources beyond traditional Government grant funding. The income can then be reinvested in our sector to facilitate long-term financial and organisational sustainability and growth among our Members and VACCHO.

As we reflect on VACCHO's history, we are all motivated to consider our future and sustainability, both of which are intrinsically linked.

We are excited about our future as we seek to strengthen ourselves to support and build future growth in our Membership.

This year VACCHO offered a Shared Business Services model to Members as a sustainable investment strategy. It provides high quality financial and business advice to Members using the expertise and experience within VACCHO. The business models of not-forprofits have changed dramatically in this competitive funding environment. In order to be a self-determining service, efficiencies are a fundamental requirement. Our Shared Business Services model focuses on increasing the sustainability of VACCHO and our Members, and is born out of working with economies of scale. Our Members may not need a full-time finance officer, registered CPA, or payroll officer. Accessing the shared expertise of someone based in VACCHO is a service we identified as mandatory to grow the sector. Economies of scale are found in purchasing power (E.g. with the ICT services), and our Members can receive high quality services and products with low risk through this model.

The trialled Shared Business Service model has been taken up and supported by our Members. VACCHO aims to extend this model to position ourselves for the next one to two decades. These internal changes will be in consultation with our Membership and VACCHO staff.



# **Financials**

### 2016-17 Financial year in review – key focus activities and outcomes

The 2017 VACCHO initiative was to reshape our customer service thinking, our advocacy strategy with funders, and to strengthen digital platforms internally and across our Members to ensure we protect the integrity and security of our technology infrastructure.

### New financial management system

Mid 2017 the VACCHO Board approved the implementation of a new financial management system. The system has provided VACCHO with significant benefits in internal controls, improved auditability and accountability, increased automation and work flow efficiencies. The innovation has been recognised by a number of other not-for-profit (NFP) organisations in Victoria and Queensland, which have integrated some of these benefits into their organisations.

The sharing of this innovation demonstrates VACCHO's continued growth in internal capability and positioning, providing valuable contributions to our Members and to the NFP community as a whole.

### Treasury and investment opportunities

VACCHO has continued work in improving our treasury management along with identification and assessment of potential commercial

investment opportunities. The process has been guided by a renewed investment policy incorporating the Indigenous Investment Principles. This work is part of the longer-term sustainability strategy of VACCHO.

### **Partnerships**

VACCHO has also been investigating opportunities to build statewide networks to engage in partnerships and philanthropic investments to deliver ongoing long-term sustainability as part of the drive to selfdetermination for Aboriginal people within our Community. VACCHO is looking to provide creative and innovative investment solutions while growing our commercial activities.

VACCHO achieved good results as we grow our registered training organisation (RTO) and commercial training units, through our new and existing commercial partnerships.

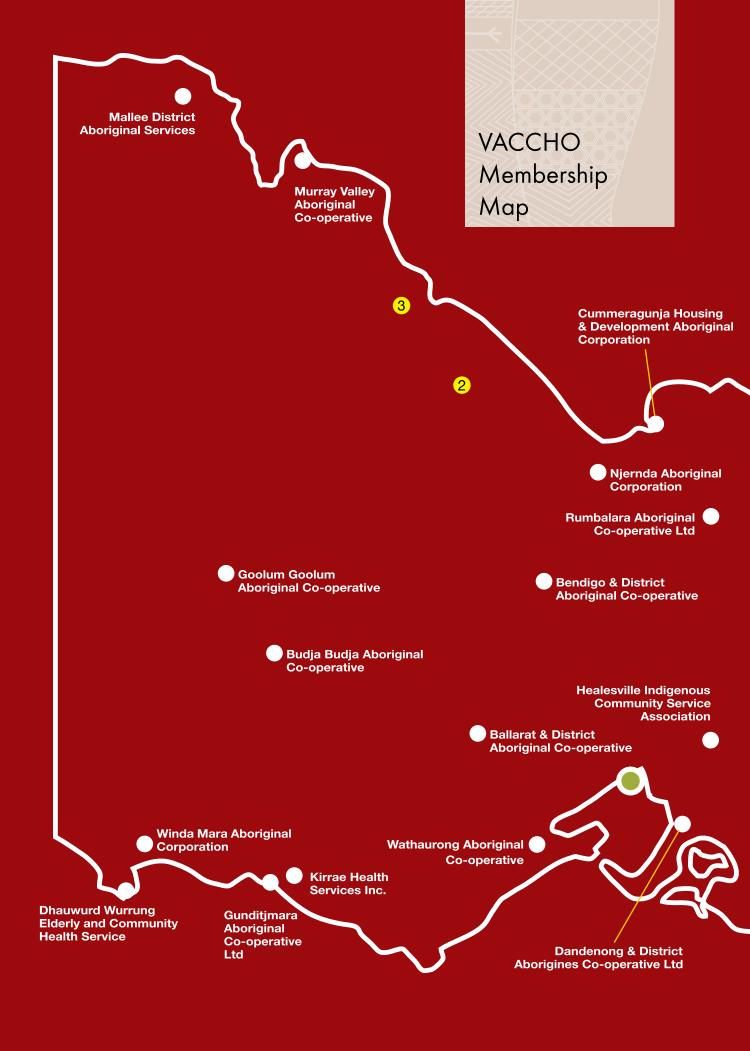
The financial results for the year ended 30 June 2017 show a \$331,405 surplus compared to a \$894,119 surplus in the previous year.

During the 2016-17 year, VACCHO received from funders increased program revenues for critical activities and deliverables within Aboriginal communities in Victoria.

For more detailed financial information, please refer to our audited financial report for year ended 30 June 2017.

### A snapshot of VACCHO's financial performance for the 2016-17 year 3 year financial summary

	2017	2016	2015
	\$000	\$000	\$000
Total revenue	11,285	9,820	10,115
Total expenses	10,964	8,926	8,516
Net result for the year	331	894	1,600
Total assets	23,764	16,869	14,517
Total liabilities	12,225	5,661	4,203
Total equity	11,539	11,208	10,314



- Aboriginal Community Elders Services
- · Bubup Wilam Aboriginal Early Learning Child and Family Centre
- Melbourne Aboriginal Youth, Sports and Recreation Co-operative
- Ngwala Willumbong Co-operative
- · Victorian Aboriginal Health Service
- Weenthunga Health Network

