
Strong Workforce Healthy Future

Initiative Type

Service Improvement

Status

Deliver

Added

11 December 2018

Last updated

10 January 2024

URL

<https://test.clinicalexcellence.qld.gov.au/improvement-exchange/strong-workforce-healthy-future>

Summary

The first Aboriginal and Torres Strait Islander Health Practitioner positions in Queensland Health are now established, as a result of eight years of work led by the Workforce Strategy Branch, Strategy Policy and Planning Division. In addition, Aboriginal and Torres Strait Islander Health Practitioners will now be able to work to full clinical scope of practice across both public health and Aboriginal and Community Controlled Health Services. This has been made possible through the establishment of a

comprehensive clinical governance framework, legislative amendments to provide authorities to use scheduled medicines, and interim employment arrangements for Hospital and Health Services. The successful implementation of the Aboriginal and Torres Strait Islander Health Practitioner, and facilitating this workforce to work to top of scope, is a key deliverable of the Health Minister's Key Results Area 4: Improving Closing the Gap through an empowered Indigenous workforce. Significant and collaborative stakeholder engagement through the development process has resulted in unanimous support for the implementation of the role as planned, including support from Hospital and Health Services, ACCHSs, National Aboriginal and Torres Strait Islander Health Worker Association, AMAQ and QNMU, clinicians and Aboriginal and Torres Strait Islander health workers. Workforce Strategy Branch partnered with the following Queensland Health teams in delivering this outcome:

- Health Care Legislation Improvement Unit, Chief Health Officer and Prevention Division
- Strategic Policy and Legislation Branch, Strategy Policy and Planning Division
- Rural and Remote Clinical Support Unit, Torres Cape Hospital and Health Service

In addition, the valued contribution and advocacy of the following external stakeholders is acknowledged:

- Torres Cape Hospital and Health Service Chief Executive and Executive
- Apunipima Cape York Health Service
- Queensland Aboriginal and Islander Health Council

Key dates

Jan 2010

Jan 2019

Implementation sites

Throughout Queensland.

Key Contacts

Warren Locke

2043

paul.blee@health.qld.gov.au

Manager

Workforce Strategy Branch

(07) 37085734

Warren.Locke@health.qld.gov.au

Aim

Build a strong workforce for a healthy future for Aboriginal and Torres Strait Islander Queenslanders.

Benefits

- Improved health outcomes through the provision of culturally safe and geographically accessible clinical health services for Aboriginal and Torres Strait Islander people.
- Aboriginal and Torres Strait Islander communities will have timely access to the medicines they require.

Background

Closing the Gap is contingent on a strong culturally appropriate and culturally capable workforce that is effectively positioned to meet the health needs of individuals and communities. A strong workforce for a healthy future for Aboriginal and Torres Strait Islander Queenslanders. Building the Aboriginal and Torres Strait Islander Health Practitioner workforce is a key action within the Aboriginal and Torres Strait Islander Health Workforce Strategic Framework 2016-2026, which will contribute to the achievement of Queensland Health's commitment to the whole of Government Moving Ahead Strategy and to grow Aboriginal and Torres Strait Islander workforce participation to 3.0 per cent by 2022.

Solutions Implemented

Clinical governance guidelines and tools to support appropriate governance arrangements have been developed in collaboration with the Rural and Remote Clinical Support Unit, Torres Cape Hospital and Health Service (commissioned by Workforce Strategy Branch), and will enable health services to determine the requirement for the registered role in their services, assess the practice scope of individual Aboriginal and Torres Strait Islander Health Practitioners, and promote effective and productive teamwork based on transparency and good understanding about the role and its functions. Legislative amendments to the [Health \(Drugs and Poisons\) Regulation 1996](#) now authorised Aboriginal and Torres Strait Islander Health Practitioners employed by Hospital and Health Services or Aboriginal and Torres Strait Islander Community Controlled Health Services in isolated practice areas to:

1. In accordance with the [Drug Therapy Protocol - Aboriginal and Torres Strait Islander Health Practitioner Isolated Practice Area](#), health management protocol and approved in the individual Practice Plan:
 - Administer or supply an S2 or S3 poison;
 - Obtain, possess and administer a controlled drug on the oral or written instruction of a doctor or nurse practitioner;
 - Obtain, possess, administer and supply a restricted drug on the oral or written instruction of a doctor, nurse practitioner or dentist.
2. Administer or supply a restricted drug during a declared public health emergency relating to an infectious medical condition under the [Communicable disease drug therapy protocol](#).
3. Administer or supply a restricted drug while an influenza emergency declaration is in force under the [Pandemic influenza program drug therapy protocol](#).
4. Administer the following restricted drugs without the oral or written instruction of a doctor, nurse practitioner or dentist:
 - a fluoride varnish
 - box jellyfish anti-venom
 - S4 ipratropium
 - S4 salbutamol

Evaluation and Results

The Aboriginal and Torres Strait Islander Health Practitioner role will complement the valuable and ongoing work of Aboriginal and Torres Strait Islander Health Workers, clinician support workforces and other clinicians delivering services to Aboriginal and Torres Strait Islander people. The role in itself will provide local leadership in the delivery of culturally safe and appropriate health services within communities. The most significant areas of impact will be the rural and remote communities, with implementation planned across these areas as a priority. Torres Cape Hospital and Health Service is leading the first phased implementation within Hospital and Health Services. An implementation evaluation will be undertaken to identify the critical success factors enabling the introduction of and full utilisation of this role. The Queensland governance and legislative framework is recognised nationally as comprehensive and ahead of other jurisdictions. The achievements of Queensland Health have generated interest from the ACT, VIC and SA as a model which might be adapted in their early stages of implementation, and from the NT in reviewing their current governance model.

Lessons Learnt

Specific recognition of Warren Locke, Manager, Aboriginal and Torres Strait Islander Workforce, Workforce Strategy Branch is warranted for his long-term commitment and advocacy for the Aboriginal and Torres Strait Islander health workforce at departmental, Queensland Health, State and national levels. As an Aboriginal Elder and experienced policy officer and leader, his has achieved significant respect and credibility across all levels for his leadership in Aboriginal and Torres Strait Islander health and workforce. His influential leadership has been instrumental in the achievement of this body of work and for the extensive support provided by stakeholders.

Further Reading

[Aboriginal and Torres Strait Islander Health Practitioner](#)

PDF saved 15/03/2025