

# IAHA COVID-19 Support and Response Strategy

#### Introduction

The COVID-19 pandemic is having a clear effect on the membership of Indigenous Allied Health Australia (IAHA). As the membership body for the Aboriginal and Torres Strait Islander allied health workforce, Indigenous Allied Health Australia (IAHA) play an important role in supporting members, even more so in the current environment.

This document identifies some strategies and action IAHA are taking in order to support members in the short, medium and longer term. The sections below explore some of the themes, issues and opportunities for IAHA, including some of the existing efforts as of May 2020, and some areas which may require new or additional focus. These have been collated under broad themes, but are often linked.

IAHA have established a COVID-19 Advisory Group, consisting of experienced Aboriginal and Torres Strait Islander members, to provide direct leadership, engagement and strategic advice from the ground up and across the diversity of allied health. At the time of writing, IAHA members have identified a series of impacts across a range of allied health professions and settings.

In considering the strategies and issues below, it is important to consider IAHA's remit in supporting and advocating on behalf of the Aboriginal and Torres Strait Islander allied heath workforce, promotion of education and training pathways, access to culturally responsive services for Aboriginal and Torres Strait Islander people, families and communities and leading allied health and Indigenous workforce policy and planning.

A brief summary of IAHA activities is available at **Appendix A** at the end of this document.

#### Transition to study and work from home arrangements

We know that some IAHA members, both students and graduates, have been impacted by the rapid transition to home based work and study arrangements. This includes access issues to previous resources such as university and workplace ICT, internet and other items.

#### Student bursaries and financial assistance

IAHA have maintained the IAHA student bursaries and have offered more funding than traditionally available to meet the needs of students, particularly as many face additional stressors such as online exams and the absence of traditional supports.

IAHA are seeking additional resourcing to expand the financial and others supports available to members. This funding would be administered by IAHA directly, focused

toward providing members the financial means to meet additional costs such as purchase of ICT equipment, home internet and other items (for example furniture) to enable them to work productively, effectively and safely from home. This process aims to be responsive and administratively simple for applicants with applications accepted via the IAHA <u>website</u>.

# Support for the continuation of student placements

Various stakeholders have highlighted the need to support training placements to ensure that students are able to progress with their education and training and graduate as skilled and competent professionals. IAHA support a diverse range of allied health professions, each of which are impacted differently.

# IAHA are:

- seeking assurances from key stakeholders that students will be supported to continue and complete their studies wherever possible, with a particular focus on supporting Aboriginal and Torres Strait Islander health students.
- utilising existing relationships and IAHA's profile within the sector to pursue policy, project and research based placements for members where this is considered a suitable alternative to clinical placements..
- utilising existing direct and indirect relationship with service providers which could be utilised, working alongside impacted students, institutions and training providers to secure, suitable clinical placements.
- continuing to offer clinical placement scholarships for rural and remote placement opportunities available with the support of the Royal Flying Doctor Service, the administration of which needs to consider the current context.
- advocating that impacted disciplines utilise learnings in other professions (for example nursing) in which alternatives to clinical placements, such as simulation, have been readily adopted.

As this remains a rapidly changing environment, it is important that communications to student members emphasis choice and support for members where pressures exist.

# **Ongoing professional development**

Tailored and culturally informed professional development for the Aboriginal and Torres Strait Islander health workforce remain important. IAHA, in collaboration with our sister organisations, will deliver a series of professional development opportunities to the Aboriginal and Torres Strait Islander health workforce.

IAHA will host the first five of the webinars, commencing late April and occurring once per week, with a focus on skills, knowledges and behaviours that will support the workforce to remain well delivered by leaders both within the IAHA membership and their fields.

Another collaborative activity with our partner organisations is the Aboriginal and Torres Strait Islander Health Workforce toolkit that has some tips and contacts for all members, along with posters they can use in community to share health and wellbeing messages. This was released in early May and is accessible on the <u>IAHA</u> website.

# **Connectedness and Wellbeing**

#### Yarning sessions

While professional development and supports are important, informal engagement and maintaining social connectedness and good humour will be essential, particularly for the mental health of IAHA members. IAHA have initiated member yarning sessions to support members to come together, discuss issues they're faced with, share strategies and connect with supports through IAHA and peers.

Yarning sessions have been held at various times and days, with different cohorts, and on different themes. The response to these sessions have been positive, with each session engaging with new and different members, and members providing feedback that the sessions are valuable and timely.

# Messaging and engagement

IAHA have promoted messages from leaders and other high profile figures, such as IAHA Patron, Professor Tom Calma, which offer support and guidance for members. This includes more general messaging promoting a sense of togetherness, tailored messages to specific audiences, or information on dealing with particular issues such as managing grief and loss during the pandemic.

IAHA have established and will continue to promote social media messaging encouraging social connectedness amongst the membership, including the social media messaging under the Stay Connected, Stronger Together banner and the WeAreIAHAFamily hashtag. IAHA are working with Aboriginal entertainer Constantina Bush to present important messages about wellbeing in a fun and engaging way as well as reminders for members on other IAHA activities coming up.

# Profiling members work

IAHA recognise that members have shown significant leadership in their fields, workplaces, families and communities, including working proactively to address the needs of Aboriginal and Torres Strait Islander people through this challenging time. IAHA are seeking profile the important work of members and organisations through our newsletter and social media communications.

# COVID-19 information 'clearinghouse'

It is important that IAHA is conscious of providing members with clear messaging and a singular source for reliable information relevant to them as the volume of information can be overwhelming.

IAHA have established a dedicated COVID-19 page on the website, filtering information for relevance to the membership and sharing information from regarded, quality sources.

In addition to sharing information, IAHA must consider how knowledge and information generated internally is communicated and received, this includes business as usual items continuing in parallel to the COVID-19 response (for example research).

# Mental health and social and emotional wellbeing

Peak mental health bodies and researchers are alerting others of the short to long terms mental health impacts and the forecast of increased suicides resulting from the economic and social impacts linked directly to the COVID-19.

The focus for IAHA is twofold:

- 1. supporting the social and emotional wellbeing of the Aboriginal and Torres Strait Islander health workforce; and
- 2. systems which protect and maintain the optimal social and emotional wellbeing of Aboriginal and Torres Strait Islander people, families and communities.

IAHA are interested in working in partnership with members, communities and partner organisations to develop models which address these two aims.

The additional funding that IAHA is seeking from government would, in part, be directed to therapy based interventions for IAHA members, including access to traditional or cultural healers and healing. This in recognition of the need to protect Aboriginal and Torres Strait Islander health workforce as a vital resource for the wellbeing of Aboriginal and Torres Strait Islander peoples.

Longer term models of social and emotional wellbeing workforce development and service delivery are essential in responding to learnings from COVID-19, to meet the continued need to provide accessible and appropriate services, and to protect against future challenges. Mental health services need to be overhauled to provide culturally safe and responsive care that meets the needs of Aboriginal and Torres Strait Islander peoples.

# **Policy Leadership**

# Employment and deployment of allied health in the COVID-19 response

A key role of IAHA as a workforce peak is to engage in solutions focussed advocacy with Ministers, Commonwealth and State government departments, universities, workforce agencies and other key stakeholders.

IAHA advocate for the appropriate utilisation of the allied health workforce and allied health services throughout the COVID-19 response, including both 'frontline' and acute environments and the ongoing management of chronic conditions outside of these higher risk and high cost (tertiary) settings.

# Ongoing role and recognition of allied health in primary care

In addition to the COVID-19 workforce, allied health services play a vital role in the ongoing delivery of primary care and service delivery in sectors such as aged care, disability, early childhood, community health and social and emotional wellbeing. This role has been largely overlooked to date, particularly by government.

Promoting and supporting the ongoing role of this workforce is important to keep people well and reduce burdens elsewhere in the health system, for example general practice and acute settings (in which other risks may also present).

# Workforce models

The workforce challenges posed by the COVID-19 pandemic highlights IAHAs concerns about health care delivery models, particularly in rural and remote areas where there is a reliance on locum or fly in, fly out skills. Decisions of professionals to withdraw from these areas, or difficulties getting locum skills in to these areas highlights the need for greater investment in local health workforce solutions.

There is the opportunity to utilise these issues in the current system to strengthen IAHA's argument for workforce development initiatives such as the Aboriginal and Torres Strait Islander Health Academy model and the concept of multidisciplinary, co-located service hubs working across sectors (such as primary care, disability and aged care). Additional funding is being sought for IAHA to lead these strategies and solutions.

# Personal protective equipment

Access to appropriate personal protective equipment (PPE) will be essential to supporting the good health and wellbeing of members delivering in person services, particularly those in higher risk settings or in locations with known cases.

IAHA receive regular briefings on PPE stock and distribution and continue to advocate for suitable distribution of equipment, with a prioritisation for the community-

controlled sector, allied health, and areas in which PPE shortages would pose additional and unacceptable risks to the workforce.

# Advocacy and longer term focus areas

# Maintain new ways of working

In response to the COVID-19 pandemic and the social distancing recommendations, the Commonwealth have introduced additional Medicare Benefits Schedule (MBS) items to replicate the in person delivery of certain allied health services, where clinically appropriate.

Retention of these MBS items beyond the period of the pandemic may support greater flexibility in the delivery of allied health services, particularly to areas impacted by existing workforce shortages.

A shift toward greater acceptance in telehealth in allied health will support IAHA's advocacy for more flexible service delivery alongside local workforce development and employment. This may include remote clinical supervision and better utilisation of allied health assistants to support service delivery.

# Flexible education and training

Universities have also been impacted with a requirement to adjust teaching methods. IAHA have long advocated for more flexible models of delivery for allied health education and training to facilitate choice and support students to live and learn closer to home.

The universities demonstrating this capacity, where it aligns with the commercial interests and/or operational requirements, strengthens IAHA's advocacy that such courses can be delivered in a way which better students from outside metropolitan areas while still achieving learning outcomes.

# Aboriginal and Torres Strait Islander workforce supports

While IAHA regularly engage with universities, employers and workforce agencies regarding the supports in place for Aboriginal and Torres Strait Islander students and professionals, there may be need to advocate for increased support and resources, over a number of years, to provide more intensive supports and supervision for future graduates impacted by disrupted and altered teaching methods.

Improving how new graduates are supported in the transition to the workforce, particularly culturally responsive supports for Aboriginal and Torres Strait Islander graduates, will assist in graduate retention and further enable the more flexible models of training delivery described above.

# Social determinants of health

IAHA, alongside the other Aboriginal and Torres Strait Islander Health Workforce Peak Organisations, have agreed to advocate for issues which extend across the entire Aboriginal and Torres Strait Islander health workforce or which relate to health and wellbeing more generally and would benefit from a coordinated and reinforced message. Several topics have been discussed, including:

- infrastructure digital infrastructure to deliver online services and resources to change business delivery and support
- ethical and cultural considerations (for example advance care planning needs)
- food security
- student clinical placements
- racism in the health system and in the health workforce

IAHA will continue to advocate on these issues in our national policy role.

# Community infrastructure and housing

There are a number of items identified as longer term priorities of our members which could be pursued with the additional context of the COVID-19 and the potential impacts of future global health challenges and emergencies.

This includes access appropriate, safe and affordable housing, including for the health workforce living and training in these settings, with this need highlighted by COVID-19 in which social distancing highlights the ongoing need to address housing issues such as insecurity and overcrowding.

Likewise water security and access to potable water is an essential human right further highlighted by the need for people, families and communities to be able to practice good hygiene and prevent transmission of conditions and illnesses such as coronavirus.

# Domestic and family violence

Domestic and family violence (DFV) is another issue which may impact on the allied health workforce, both in personal and professional capacities, and the need for culturally responsive and trauma informed responses is important. The impact of DFV, particularly on women and children, is an ongoing issue which relates to other social determinants, such as access to appropriate housing discussed above.

The allied health workforce need to be well supported to recognise these issues and manage the impact on themselves and those they care for. IAHA webinars on Trauma Informed Care, reflective practice, self-care and social and emotional wellbeing is one of the key ways IAHA is supporting the workforce.

# Digital inclusion

Issues such as digital inclusion and digital infrastructure, again with high relevance to rural and remote areas and urban contexts has been highlighted as a barrier or enabler to participation in daily life and access to services such as telehealth.

A strong Aboriginal and Torres Strait Islander media and communications capability is essential for tailored and appropriate public health messaging. COVID-19 has highlighted the importance and capability of this sector, albeit without adequate resourcing in recent years.

# Climate and health

The impact of climate change on health and culture is another topic identified by members and, while this does not have a specific relationship with COVID-19, it is recognised that a changing climate may increase the frequency and severity of certain public health issues.

It is also worth recognising that the COVID-19 pandemic has closely followed one of the worst bushfire seasons in recent years, likely compounding the mental health and social and emotional wellbeing impacts for many individuals, families and communities.

There is a risk that, without advocacy on this front, the significance of these events are somewhat obscured by the ongoing focus on COVID-19 and not appropriately or adequately responded to.

#### Data

Other longer term priorities may be generated by data, evidence and research generated on the back of these events, and reviewing the impact of COVID-19 on Aboriginal and Torres Strait Islander peoples. There is a high likelihood that existing data quality, availability and reporting issues will again be highlighted retrospectively.

# Conclusion

IAHA have a vital and ongoing role in the response to COVID-19. In pursuing the actions and focus areas identified above, it will be important for IAHA to actively seek out and amplify the input, expertise and voices of members.

Likewise, IAHA will need to engage with external stakeholders and support the advocacy of peer organisations, where this is in the interests of IAHA members and Aboriginal and Torres Strait Islander people, families and communities.

IAHA recognise that the need for support and advocacy will extend beyond the initial COVID-19 pandemic response, with emerging and ongoing threats to good health

and social and emotional wellbeing, as well as opportunities to address longstanding issues such as the social determinants of health.

Good governance and oversight, including through the IAHA COVID-19 Advisory Group, will be required to ensure that resources and energy is directed effectively into the areas in which leadership from IAHA is most needed and/or achieves the greatest benefit.

> Make a Difference... Be an allied health professional

|   |  |  |  |  |   | Appendix: support summary  |  |
|---|--|--|--|--|---|--|--|
| ſ | ransition to study<br>and work from<br>home<br>arrangements  | Support for<br>continuation of<br>clinical placements  | Ongoing<br>professional<br>development   | Connectedness and<br>wellbeing   | Mental health and<br>social and<br>emotional<br>wellbeing   | Policy Leadership  | Advocacy and<br>longer term focus<br>areas   |
| • | Student support<br>bursaries to<br>cover costs<br>incurred by<br>students.   | Engagement with<br>key external<br>stakeholders to<br>support clinical<br>placements.  | Established a co-<br>lead National<br>Aboriginal and<br>Torres Strait<br>Islander health<br>workforce series | <ul> <li>Weekly online<br/>Member Yarning<br/>sessions.</li> <li>Continue to<br/>promote the</li> </ul>    | <ul> <li>Advocating and<br/>recognising the<br/>impact of COVID-<br/>19 on mental<br/>health and social<br/>and emotional</li> </ul>  | <ul> <li>Established an<br/>IAHA COVID-19<br/>Advisory Group<br/>to provide<br/>strategic advice<br/>and expertise.</li> </ul> | <ul> <li>Planning for<br/>opportunities and<br/>key advocacy<br/>points on the<br/>back of COVID-<br/>19.</li> </ul>   |
| • | Additional<br>funding from<br>stakeholders to<br>support IAHA<br>member<br>bursaries and                                   | <ul> <li>Continue clinical<br/>placement<br/>options for<br/>Aboriginal and<br/>Torres Strait<br/>Islander students</li> </ul>   | <ul> <li>of self-care webinars.</li> <li>Develop and deliver an IAHA continuing</li> </ul>                   | <ul> <li>IAHA mentoring program as another avenue for support.</li> <li>Connecting with</li> </ul>         | <ul> <li>Working with key stakeholders in mental health to influence the</li> </ul>   | <ul> <li>Continue to play<br/>a prominent role<br/>in national<br/>Aboriginal and<br/>Torres Strait</li> </ul>                 | Advocacy for<br>learnings of<br>COVID-19 to<br>enhance<br>education and  |
| • | scholarships.<br>Member Yarning<br>sessions for<br>connection and  | <ul> <li>where possible.</li> <li>Maintaining<br/>existing<br/>relationships with<br/>stakeholders</li> </ul>  | <ul> <li>professional<br/>development<br/>webinar series<br/>for members.</li> <li>Continue to</li> </ul>    | members for a<br>catch up, to<br>engage them in<br>supports and to<br>update details.                      | <ul> <li>mental health<br/>system moving<br/>forward.</li> <li>Continue to<br/>provide open</li> </ul>                                | <ul> <li>Islander health policy.</li> <li>Continuing to play an influential role in allied</li> </ul>                          | <ul> <li>care delivery<br/>moving forward.</li> <li>Continuing to<br/>support issues<br/>which members</li> </ul>      |
| • | sharing including<br>membership<br>categories.<br>Member themed<br>yarning sessions<br>on specific topics<br>e.g. research | <ul> <li>Generation of the second statement of the</li></ul> | share<br>stakeholder<br>professional<br>development<br>opportunities with<br>members.                        | Cultural healers<br>and wellbeing<br>experts delivering<br>sessions for<br>Aboriginal and<br>Torres Strait | <ul> <li>communication<br/>options to IAHA<br/>for members to<br/>make contact.</li> <li>Continue to<br/>deliver self-care</li> </ul> | <ul> <li>Key messaging<br/>on:</li> <li>the need for<br/>utilisation of the</li> </ul>   | have previously<br>raised around<br>housing and<br>support studying,<br>training and<br>working in rural<br>and remote |

| Transition to study<br>and work from<br>home<br>arrangements  | Support for<br>continuation of<br>clinical placements  | Ongoing<br>professional<br>development | Connectedness and<br>wellbeing  | Mental health and<br>social and<br>emotional<br>wellbeing  | Policy Leadership  | Advocacy and<br>longer term focus<br>areas                                     |
|---|--|--|---|--|--|--|
| <ul> <li>Capturing 'hot<br/>topic' issues that<br/>are challenging<br/>members for<br/>potential action.</li> </ul>                         | <ul> <li>support clinical placements and support members</li> <li>Contact all student members</li> </ul> |  | <ul> <li>Islander<br/>members.</li> <li>Hosting IAHA<br/>participation<br/>activities on</li> </ul>   | <ul> <li>information, tips</li> <li>and professional</li> <li>development</li> <li>opportunities.</li> <li>Seek additional</li> </ul>  | allied health<br>workforce<br>- the essential<br>nature and role of<br>allied health in a  |  |
| <ul> <li>Advocating and<br/>working with<br/>stakeholders to<br/>address hot<br/>topics and<br/>solutions to<br/>assist members.</li> </ul> | and offer support<br>and/or foster<br>placement<br>opportunities.  |  | <ul> <li>Patron and IAHA<br/>ambassadors<br/>providing positive<br/>messages on<br/>social media</li> <li>Continue to<br/>collate member<br/>stories to share<br/>in newsletters</li> </ul> | <ul> <li>Seek additional<br/>funding for<br/>mental health<br/>and cultural<br/>supports for<br/>members.</li> <li>Collaborated with<br/>partner<br/>organisations<br/>and contributed<br/>to the National<br/>Aboriginal and<br/>Torres Strait<br/>Islander health<br/>workforce<br/>COVID-19 toolkit.</li> </ul> | <ul> <li>variety of settings<br/>including primary<br/>care; and</li> <li>priority for local<br/>workforce<br/>development</li> <li>food security and<br/>healthy housing</li> </ul> | Planning for<br>member support<br>into the future<br>and online<br>activities. |