

National Aboriginal and Torres Strait Islander Ageing and Aged Care Council

Submission

Development of an Aged Care Allied Health needs assessment tool

June 2025



NATSIAACC



Contents

| | |
|---|---|
| National Aboriginal and Torres Strait Islander Ageing and Aged Care Council | 3 |
| About | 3 |
| Our Vision | 3 |
| Our Purpose..... | 3 |
| With thanks..... | 3 |
| Funding | 3 |
| NATSIAACC Recommendations..... | 4 |
| Executive Summary | 5 |
| Embedding Cultural Safety, Self-Determination and Trauma-Aware Practices | 5 |
| Community- Informed Co-Design | 7 |
| Need for Holistic Model of Health | 7 |
| Conclusion | 9 |



NATSIAACC

National Aboriginal & Torres Strait Islander Ageing
and Aged Care Council



National Aboriginal and Torres Strait Islander Ageing and Aged Care Council

About

The National Aboriginal and Torres Strait Islander Ageing and Aged Care Council (NATSIAACC) is the national peak body for Aboriginal and Torres Strait Islander ageing and aged care. NATSIAACC works to ensure that Aboriginal and Torres Strait Islander Elders and Older People can access support and care that is culturally safe, trauma aware and healing-informed, and recognises the importance of their personal connections to community, Country and/or Island Home.

NATSIAACC is building a membership base of:

- Aboriginal and Torres Strait Islander community-controlled providers of ageing and aged care, and
- Entities with an interest in culturally appropriate ageing and aged care services.

NATSIAACC's founding Directors are all leaders in Aboriginal and Torres Strait Islander ageing and aged care provision.

Our Vision

All Aboriginal and Torres Strait Islander people are thriving, healthy, strong, with ongoing cultural connections in their older years.

Our Purpose

NATSIAACC supports Aboriginal and Torres Strait Islander older peoples, their families, and communities to identify, engage in, advocate for, and lead systemic reform to embed culturally safe practices across the aged care and ageing sector.

With thanks

NATSIAACC thanks its members, stakeholders, and other peak bodies for their valuable contributions to this submission and for generously giving their time to support older Aboriginal and Torres Strait Islander people.

Funding

NATSIAACC is funded by the Commonwealth Department of Health and Aged Care (the Department). NATSIAACC has been in operation since 2022. In the context of the current aged care reforms and the need for extensive advocacy, input, and leadership in the sector, it will be necessary to provide additional funding to support NATSIAACC to provide the input and engagement required to ensure that the reforms deliver much needed support to Aboriginal and Torres Strait Islander Elders and Older People.



NATSIAACC Recommendations

Embedding Cultural Safety, Self-Determination and Trauma-Aware Practices

- To embed NATSIAACC's cultural safety definition that was commissioned by the Department of Health, Disability and Aged Care, in extensive consultations with our Members, Providers, Communities, Elders and Older People, as a core standard where the tool must be designed and evaluated against an explicit cultural safety standard that includes Aboriginal and Torres Strait Islander definitions, not just mainstream interpretations. This standard should be co-developed with Aboriginal-led organisations.
- For the First Nations Aged Care Commissioner, once established, to oversee the cultural safety and trauma awareness elements of the tool, ensuring ongoing alignment with community needs and expectations.
- To mandate training in culturally safe, trauma aware and healing-informed care. Clinical staff administering the tool must complete place-based cultural safety training, including modules on trauma-aware and healing-informed practices beyond the general cultural awareness training.
- To incorporate cultural support indicator in the tool prompting the assessor to ask about the resident's connection to cultural support systems (e.g., cultural mentors, Traditional Healers, language groups), and whether they wish to engage these as part of their allied health needs.
- To formalise referral pathways to local ACCHOs and Aboriginal-led allied health services, ensuring Aboriginal and Torres Strait Islander Elders and Older People have the option to access culturally safe care providers.

Community- Informed Co-Design

- To formally partner with ACCOs, Aboriginal-Led Aged Care services and Aboriginal peak bodies to lead the co-design, testing and evaluation process.
- To adopt the [Good Spirit Good Life \(GSGL\)](#) tool or its validated domains as a guiding framework to ensure alignment with culturally specific models of wellbeing.
- To mandate inclusion of Aboriginal and Torres Strait Islander-specific indicators in the assessment tool that go beyond biomedical needs and encompass social, cultural, and emotional wellbeing.
- To conduct impact assessments to monitor how the tool performs specifically for Aboriginal and Torres Strait Islander Elders and Older People, with disaggregated data and qualitative insights gathered through yarning and community feedback.

Need for Holistic Model of Health

- To broaden the definition of Allied Health in aged care to include Social, Emotional and Well-being (SEWB) Workers, Aboriginal Mental Health Professionals and Traditional Healing Practitioners, recognising their acceptability within the holistic care model.
- To provide dedicated funding through aged care programs (e.g., CHSP, HCP, AN-ACC) to enable the use of Traditional Healing and Cultural Practices, including the engagement of traditional healers, where appropriate.



Executive Summary

The National Aboriginal and Torres Strait Islander Ageing and Aged Care Council (NATSIAACC) welcomes the opportunity to contribute to the Development of an aged care allied health needs assessment tool. As the national peak body for Aboriginal and Torres Strait Islander ageing and aged care, NATSIAACC advocates for reforms that embed cultural safety, respect self-determination, and support community-led service delivery.

We acknowledge the important intent of this tool to standardise and improve the identification of allied health needs within aged care settings. However, for the tool to be genuinely inclusive, equitable, and effective, it must be designed with the cultural, social, and systemic realities of Aboriginal and Torres Strait Islander Elders and Older People in mind. This submission urges the Department to expand the tool's scope to integrate culturally grounded models of wellbeing, ensuring equitable care for Elders and Older People.

Embedding Cultural Safety, Self-Determination and Trauma-Aware Practices

For the allied health needs assessment tool to be genuinely inclusive, effective, and aligned with Australia's commitments under the Closing the Gap framework and the National Aboriginal and Torres Strait Islander Health Plan 2021–2031, it must be underpinned by an Aboriginal-led, culturally safe, trauma-aware and healing informed approach.

The Department of Health, Disability and Aged Care commissioned NATSIAACC to create a definition on cultural safety in Aged Care, and after numerous consultations with Aboriginal and Torres Strait Islander organisations, Aged Care Service Providers, Communities, Elders and Older People and their families/kinship, NATSIAACC landed on the definition, being:

“Cultural safety in aged care for older Aboriginal and Torres Strait Islander people, is understanding one’s own culture and the impact that your culture, thinking, and actions may have on the culture of others through ongoing critical self-reflection. Gaining such truthful insight about oneself is critical for ensuring access to a culturally safe, respectful, responsive and racism free aged care system providing for the optimal safety, autonomy, dignity, and absolute wellbeing of Aboriginal and/or Torres Strait Islander Elders and older people, and their families. Only the Aboriginal and/or Torres Strait Islander person who is the recipient of a service or interaction can determine whether it is culturally safe.

Aged care service providers and workers must take responsibility for building trust and relationships with Aboriginal and/or Torres Strait Islander service users, and their families, and for creating a new aged care system which centres on their living experience, cultural, and ageing needs, as determined by Aboriginal and/or Torres Strait Islander service users themselves. The implementation of a trauma aware, healing informed approach to professional practice, and facilitating a greater understanding and respect for individual and collective cultures, histories, knowledges, traditions, stories, and values of Aboriginal and/or Torres Strait Islander service users, and their families, will greatly support the delivery of a quality and culturally safe aged care system. Aged care service providers must also firmly



commit to continuously measure and improve structures and behaviours necessary for cultural safety and quality support to remain embedded in the Australian aged care system.”

Following this definition, true cultural safety involves:

- Embedding Aboriginal and Torres Strait Islander governance and leadership across all levels of aged care design, delivery, and evaluation.
- Supporting and uplifting cultural identity, self-determination, and community-led decision-making.
- Employing and empowering an Aboriginal and Torres Strait Islander workforce.
- Ensuring services are responsive to cultural determinants of health, including kinship, spirituality, and cultural practices.
- Actively addressing institutional and interpersonal racism in aged care systems and services.

Cultural safety is essential for delivering equitable, high-quality aged care. It must be continuously reflected upon, measured through the voices and experiences of Elders and Older People, and upheld through strong accountability frameworks.

In this context, allied health needs cannot be meaningfully assessed through standard biomedical checklists alone. Instead, the tool must acknowledge and include the broader cultural determinants of health, the legacy of intergenerational trauma, and the importance of healing-informed engagement.

NATSIAACC recommends:

- To embed NATSIAACC’s cultural safety definition that was commissioned by the Department of Health, Disability and Aged Care, in extensive consultations with our Members, Providers, Communities, Elders and Older People, as a core standard where the tool must be designed and evaluated against an explicit cultural safety standard that includes Aboriginal and Torres Strait Islander definitions, not just mainstream interpretations. This standard should be co-developed with Aboriginal-led organisations.
- For the First Nations Aged Care Commissioner, once established, to oversee the cultural safety and trauma awareness elements of the tool, ensuring ongoing alignment with community needs and expectations.
- To mandate training in culturally safe, trauma aware and healing-informed care. Clinical staff administering the tool must complete place-based cultural safety training, including modules on trauma-aware and healing-informed practices beyond the general cultural awareness training.
- To incorporate cultural support indicator in the tool prompting the assessor to ask about the resident’s connection to cultural support systems (e.g., cultural mentors, Traditional Healers, language groups), and whether they wish to engage these as part of their allied health needs.
- To formalise referral pathways to local ACCHOs and Aboriginal-led allied health services, ensuring Aboriginal and Torres Strait Islander Elders and Older People have the option to access culturally safe care providers.



Community- Informed Co-Design

To ensure that the proposed allied health needs assessment tool is appropriate, effective, and safe for Aboriginal and Torres Strait Islander Elders and Older People, its design and implementation must be Aboriginal and Torres Strait Islander-led from inception through to evaluation. Aboriginal and Torres Strait Islander Communities have long called for culturally specific, self-determined approaches to health and aged care. Co-design, if not deeply embedded and community-governed, risks becoming a tokenistic process that reinforces systemic inequity.

NATSIAACC strongly advocates for the assessment tool to be grounded in Aboriginal and Torres Strait Islander-led design principles, ensuring it is not merely adapted for Aboriginal and Torres Strait Islander users but fundamentally shaped by their worldviews, expertise, and lived experiences.

Importantly, it must avoid deficit-based, Western-centric metrics and instead reflect strengths-based, culturally grounded indicators, such as connection to Country and/or Island Home, kinship, cultural practices, and self-defined wellbeing priorities, ensuring it is both accessible and empowering for its users.

NATSIAACC recommends:

- To formally partner with ACCOs, Aboriginal-Led Aged Care services and Aboriginal peak bodies to lead the co-design, testing and evaluation process.
- To adopt the [Good Spirit Good Life \(GSGL\)](#) tool or its validated domains as a guiding framework to ensure alignment with culturally specific models of wellbeing.
- To mandate inclusion of Aboriginal and Torres Strait Islander-specific indicators in the assessment tool that go beyond biomedical needs and encompass social, cultural, and emotional wellbeing.
- To conduct impact assessments to monitor how the tool performs specifically for Aboriginal and Torres Strait Islander Elders and Older People, with disaggregated data and qualitative insights gathered through yarning and community feedback.

Need for Holistic Model of Health

While the current scope of allied health professions including physiotherapy, occupational therapy, speech pathology, dietetics, and podiatry provides essential clinical support in aged care, this scope remains limited when assessed against Aboriginal and Torres Strait Islander understandings of health and wellbeing.

Aboriginal and Torres Strait Islander health models prioritise Social and Emotional Well-being (SEWB), a framework recognising that connection to culture, community, kinship, and Country and/or Island Home is foundational to health. The Royal Commission into Aged Care Quality and Safety explicitly highlighted systemic failures in addressing these dimensions for Aboriginal and Torres Strait Islander Elders and Older People.



Areas recommended for Inclusion:

- **Mental Health Support:**

Aboriginal and Torres Strait Islander Elders and Older People face unique mental health challenges, often linked to intergenerational trauma, racism, disconnection from land and culture, and the impacts of institutionalisation. Mental health professionals included in the tool must go beyond generalist clinicians to include:

- Aboriginal and Torres Strait Islander Mental Health Workers.
- Psychologists and Counsellors with demonstrated cultural competency or specific training in Aboriginal and Torres Strait Islander Social and Emotional Wellbeing frameworks.
- Partnerships with Aboriginal Community Controlled Health Organisations (ACCHOs) to deliver community-led mental health supports

- **Social and Emotional Wellbeing Services:**

The Social and Emotional Well-being model, as outlined in national frameworks such as the [*National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing \(2017–2023\)*](#), must guide the tool's development. This model acknowledges that wellbeing is influenced by factors such as:

- Connection to body, mind, emotions, family, kinship, community, culture, Country and/or Island Home, and spirituality.
- History of colonisation, loss, grief, and trauma.
- Structural barriers to care and cultural safety.

Social and Emotional Well-being Practitioners, Cultural Advisors, and community-based Elders must be part of multidisciplinary teams assessing and supporting older people in aged care.

- **Traditional Healers and Cultural Practitioners:**

Where appropriate and requested by Elders and Older People, the tool must allow for the involvement of Traditional Healers (e.g., Ngangkari in Central Australia) and recognised Cultural Practitioners. These healing modalities are longstanding, respected components of Aboriginal and Torres Strait Islander health systems and must be recognised as legitimate within aged care frameworks.

Their involvement:

- Affirms cultural identity and self-determination.
- Builds trust in aged care services.
- Provides spiritual and emotional support not otherwise met by mainstream services

NATSIAACC recommends:

- To broaden the definition of Allied Health in aged care to include Social, Emotional and Well-being (SEWB) Workers, Aboriginal Mental Health Professionals and Traditional Healing Practitioners, recognising their acceptability within the holistic care model.
- To provide dedicated funding through aged care programs (e.g., CHSP, HCP, AN-ACC) to enable the use of Traditional Healing and Cultural Practices, including the engagement of traditional healers, where appropriate.



Conclusion

NATSIAACC acknowledges the Department's commitment to strengthening the identification and delivery of allied health services within aged care. However, to ensure the proposed assessment tool is inclusive, equitable, and effective for Aboriginal and Torres Strait Islander Elders and Older People, it must be fundamentally reshaped through Aboriginal-led co-design, underpinned by cultural safety, self-determination, and trauma-aware practice.

This submission strongly urges the Department to expand the scope of the tool beyond a narrow biomedical model and align it with holistic Aboriginal and Torres Strait Islander health frameworks, which recognise the importance of kinship, cultural identity, connection to Country and/or Island Home, spirituality, and healing. The tool must actively integrate Social and Emotional Well-being, mental health supports, and the involvement of Traditional Healers and Cultural Practitioners, where appropriate and desired by Aboriginal and Torres Strait Islander Elders and Older People.

Cultural safety must be embedded as a non-negotiable core standard, with robust governance, accountability, and Aboriginal-led evaluation mechanisms in place. This includes the formal partnership with Aboriginal Community Controlled Organisations (ACCOs), the use of culturally validated tools such as *Good Spirit Good Life*, and the integration of Aboriginal-specific indicators that reflect the lived experiences and priorities of older community members.

By embedding these principles, the allied health needs assessment tool will not only improve outcomes for Aboriginal and Torres Strait Islander peoples, but it will also honour their rights, uphold their dignity, and enable ageing in place with culture, respect, and purpose.

NATSIAACC looks forward to working collaboratively with the Department to ensure this tool is not only fit for purpose, but a leading example of culturally safe, community-led aged care reform in Australia.



NATSIAACC