



WURLI-WURLINJANG HEALTH SERVICE

# STRATEGIC PLAN

## 2022/2026



## Our Vision

**“To move forward as one, to heal our people and improve our health.”**

## Our Values and Behaviours

- Respect our Elders and our culture.
- Empower people to take responsibility for their own health.
- Ensure good governance and take responsibility for our organisation.
- Recognise diversity among aboriginal people in Katherine and the importance of a variety of approaches.
- Understand and acknowledge that health and healing is not only a job for health professionals but for everyone.
- Foster respect between aboriginal and non-Aboriginal people.
- Strive to achieve equitable health outcomes for all clients.

## Quality Statement

Wurli-Wurlinjang Health Service (Wurli) aims to provide the highest standard of client care to the Aboriginal people living in the Katherine town and the surrounding communities of Rockhole, Mialli Brumby, Geyulkgan Ngurro, Jodetluk and Binjari.


Wurli will adopt a holistic approach to the prevention, early health screening, diagnosis and management of illnesses.

Wurli will strive to deliver high quality comprehensive primary health care services that continually meet or exceed our clients' expectations.

Wurli will seek to achieve our aims by:

- Providing culturally appropriate and accessible services to all Aboriginal people.
- Delivering evidence-based clinical and primary health care practices.
- Ensuring communities and individuals are involved in the decision making process.
- Establishing and maintaining formal agreements or understanding with other key health and related organisations.
- Ensuring good systems are in place to support effective and efficient use of resources.
- Induction and orientation, training and development, and performance reviews of workplace participants.





**Wurli Wurlinjang  
has a current client  
population of around  
5,000 people who  
identify predominately  
as Aboriginal.**

## Our Governance

Wurli Wurlinjang is an Aboriginal Community Controlled Primary Healthcare Service, governed by a Board of Directors who are elected by members of the Wurli Wurlinjang Aboriginal Corporation from Katherine and the surrounding community living areas. Elections are held every three years and the Board has representatives from, Mialli Brumby (4 positions), Rockhole (4 positions), Katherine town (4 positions), Binjari (2 positions).

Board members take their governance responsibilities seriously and undertake accredited governance training. They understand their communities and the issues that concern residents. The Board of Directors authorise all policy decisions and prioritise the organisation's focus and activities, whilst receiving advice and information from, and giving direction to the management team.

## Our People

Wurli Wurlinjang has a current client population of around 5000 people who identify predominately as Aboriginal. There are four key Aboriginal groups of the Katherine area; the Dagoman, Jawoyn, Wardaman and Mially people.

These Aboriginal groups traditionally lived semi-nomadic lifestyles and intermarried with other clans in line with cultural laws. Katherine has been an important meeting place for Aboriginal peoples in the region for thousands of years and still is today.

Today, Aboriginal people in the Katherine region live in communities located in and around the town of Katherine. These are Myalli Brumby (also known as Kalano), which is located along the north side of the Katherine River. Rockhole which is 15 km from the town of Katherine; and Binjari, located 18 km to the south-west of Katherine. Wurli Wurlinjang also services the smaller communities of Jodetluk (also known as Gorge camp) located close to Nitmiluk National Park and Geyulkgan Ngurro (also known as Walpiri camp). Many Aboriginal people also live in the township of Katherine.

# Our Service Delivery

*Wurli Wurlinjang provides quality Aboriginal primary healthcare services that are holistic and client focused.*

Our Service Delivery model drives strategic priorities that respond appropriately to the community and client health needs. The people in our communities live with a high burden of complex and chronic health conditions that are secondary to interrelated life course social, emotional, and physical factors. These factors disproportionately affect our people and contribute to the majority of lifespan and quality of life inequality affecting Aboriginal Australians

Wurli Wurlinjang's approach to comprehensive primary healthcare considers the high level of morbidity and disadvantage within our communities and focuses care across the core domain areas of acute care, child and maternal health, well persons and preventive care for adult men and women; chronic disease management, aged care, social and emotional wellbeing care; and dental care.

Wurli Wurlinjang provides around 44,000 episodes of care (74,000 client contacts) a year. This has trended up slightly over the last 5 years, with 88% of episodes of care provided to the current client population and the remaining services to Aboriginal people visiting Katherine from other places.



Total  
episodes of  
health care  
**44,000**



Client  
Contacts  
**74,000**

**Our Service Delivery  
Model is client-centric  
while considering  
each of our clients  
holistically.**





## PRIORITY: **Strong Governance**

*Strong governance is the foundation of Wurli Wurlinjang Aboriginal Corporation and the services it provides. Aboriginal Community Control is central to Wurli Wurlinjang's governance model and ensures the cultural relevance and safety of the organisation in responding to the health needs of Aboriginal people in Katherine. Our Board of Directors are community representatives and authorise the design and delivery of our health services. Strong governance, accountability and transparency ensure the financial solvency, cultural appropriateness, and sustained delivery of our comprehensive primary healthcare services.*

## **Strategies**

**Strengthen** orientation, training, and mentoring systems for the Board of Directors so they have the right skills and knowledge

- to fully enact their role in governing the Wurli Wurlinjang Aboriginal Corporation.
- to set the strategic direction of the Wurli Wurlinjang Health Service and monitor progress on the actions to address strategic priorities.
- to follow the rules of law and lead a culture of transparency and accountability and at all times ensure the organisation is compliant and financially solvent.
- to build strong and effective relationships with their communities and facilitate two-way communication.
- to ultimately authorise the organisation's risk appetite, tolerance, and mitigation strategies.

**Source** and secure funding for the sustained delivery of quality services.

**Communicate** and promote the successes and challenges of program and service delivery to the Wurli Wurlinjang communities, funders, and other stakeholders.

### **How we will achieve this:**

- Ongoing financial solvency.
- High level of compliance across external and internal governance audits.
- Ongoing certification against ISO standard.





## PRIORITY: Comprehensive Primary Healthcare

*Comprehensive primary healthcare is the coordinated delivery of the total health care required or requested by a client. This care is aligned with the client's expressed goals of care and healthcare needs. It considers the impact of the client's health issues on their life and wellbeing and is clinically appropriate.*

### Strategies

**Mobilise** responsive and flexible team approaches to care planning and coordination.

**Maintain** high quality and safe approaches to the provision of primary healthcare and compliance with the national healthcare standards of the day.

**Emphasise** the importance of early intervention in the prevention, progression, and management of chronic health problems.

**Increase** the uptake of scheduled health checks for early detection of disease and development issues across the lifespan.

**Maintain** a focus on health promotion and community engagement.

**Integrate** client led traditional and cultural healing pathways into careplans.

#### How we will achieve this:

- Annual sustained improvement across nKPI and NTAHKPI measures.
- Ongoing maintenance of accreditation against the RACGP.
- Client satisfaction.



## PRIORITY: Health Infrastructure

*Good health infrastructure is integral to the provision of high quality and safe primary healthcare. Health infrastructure includes the built environment as well as equipment, information and communication (ICT), and data systems. These health infrastructures are key to improving standards of care, facilitating access to care, and improving health and wellbeing for clients.*

## Strategies

### **Built environment**

Continue to centralise infrastructure and programs within the Wurli Wurlinjang health precinct as per the Wurli Wurlinjang Infrastructure Master Plan.

### **Health Equipment**

Ensure equipment is safe, fit for purpose and utilised and maintained to national standards.

### **Information Communication and Technology**

Modernise digital and telehealth infrastructure to ensure that Wurli Wurlinjang can respond to rapidly advancing health, medical and information and communication technologies.

### **Data Systems**

Continually review the usefulness and relevance of data systems for supporting the delivery of quality primary healthcare services.

### **How we will achieve this:**

- Ongoing progress against the Wurli Infrastructure Master Plan.
- ICT readiness.



# PRIORITY: Workforce



*Workforce is a key enabler for the provision of quality primary health care and addressing Wurli Wurlinjang strategic priorities. Building a robust and resilient primary healthcare workforce will lay foundations for today and into the future. Paramount here is ensuring Aboriginal people are present in numbers across the health disciplines and that they are nurtured and supported to take on leadership roles within the health service.*

## Strategies

**Build** a skilled, resilient, and culturally responsive workforce to meet clients' needs.

**Strengthen** workforce planning, induction, and training processes to achieve a "Wurli fit for purpose" workforce.

**Enable** pathways for local Aboriginal people to enter and thrive in the workforce at all levels and positions.

**Explore** innovative ways to address workforce shortages and retention.

**Build** workforce capacity and cultural competency through teamwork and professional development.

**Encourage** a workplace culture of improved health, safety, and wellbeing at work.

### How we will achieve this:

- Staff satisfaction and retention.
- Increased Aboriginal participation in then Wurli Wurlinjang workforce .
- Reduction in workplace health and safety incidents.





## PRIORITY: Social and Emotional Wellbeing

*Social and emotional wellbeing is a holistic view of health that includes mental health but also encompasses other aspects of health and wellbeing such as connection to country, culture, spirituality, family and community. Social and emotional wellbeing is integral for overall health improvement.*

## Strategies

**Strengthen** focus on improving wellbeing and mental health utilising the strengths inherent in Aboriginal culture.

**Provide** dedicated services that address individual, family and community wellbeing, mental health, domestic violence, alcohol and other drug services and post justice system pathways.

**Empower** our communities to achieve their own social and emotional wellbeing goals.

Recognise the impact of colonisation on individual, family, and community social and emotional wellbeing.

### How we will achieve this:

- Dedicated quality social and emotional wellbeing services.



## PRIORITY: **Social Determinants of Health**

*There is widespread evidence demonstrating the relationship between the health and wellbeing of a person and their socioeconomic position. Factors such as employment, housing, education, and social support can work to strengthen or destabilise the health of people and their communities. Addressing these factors, collectively referred to as the social determinants of health is fundamental to improving health outcomes for individuals and communities.*

### **Strategies**

**Advocate** strongly that action on the social determinants of health is key to addressing health, lifespan and quality of life inequality for Aboriginal Australians.

**Appreciate** that many of the factors that underlie the health problems in our community relate to that individual's social situation and that the health system may only contribute a small portion to health improvement overall.

**Support** our communities to determine and control their own responses to the social determinants of health.

**Utilise** a range of culturally relevant communication to reach our communities acknowledging diversity of language, age, gender, and culture.

**Enable** two way learning through the establishment of formal communication strategies with each member community.

#### **How we will achieve this:**

- Formal communication strategy for advocating and communicating on social determinants of health documented.





## PRIORITY: Successful Partnerships

*Successful partnerships strengthen the capacity of health services to broaden their reach, provide more services, engage more clients and stakeholders, and fill service gaps. There is good evidence that strong, effective partnerships can improve the client journey and ultimately health outcomes.*

## Strategies

**Build** successful and meaningful partnerships with other Aboriginal and non-Aboriginal organisations, government agencies and stakeholders.

**Work** with partners to build a comprehensive Aboriginal controlled and led health system that is easy for our community to understand, access and navigate.

**Promote** a shared approach with partners on actions to address the social determinants of health

**Share** health information, resources, information, skills, and knowledge with partners to enable continuity of care across the entire health system.

Recognise and utilise the strengths and perspectives of our partners to improve health service planning, implementation, and evaluation processes.

### How we will achieve this:

- Relevant Memorandums of understanding current and relevant

Disclaimer: The information in this publication is current as at the date of printing and is subject to change. Updated information can be found on our website at [www.wurli.org.au](http://www.wurli.org.au). Wurli assumes no responsibility for the accuracy of information provided by third parties.



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**NACCHO**  
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