Aboriginal Inclusion Tool
A tool to improve Aboriginal inclusion in AOD services

User guide

January 2017
This resource has been adapted from the KIAP Impact Measurement Tool (2013) developed by Red Elephant Projects in conjunction with Department of Justice Victoria.

The review of this resource was supported by Felicity Ryan.

NADA is supported by funding from the Australian Government Department of Health.

NADA proudly acknowledges Aboriginal and Torres Strait Islander people as the Traditional Custodians of the lands and waters throughout Australia. Our office stands on the land of the Gadigal people of the Eora Nation.

We recognise, respect and value the deep and continuing connection of Aboriginal and Torres Strait Islander people to land, water, community and culture.

We look to and celebrate Aboriginal and Torres Strait Islander people for their cultural guidance, leadership and expertise.

We pay our respects to Elders past, present and future.

# CONTENTS

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>ABOUT NADA</td>
<td>4</td>
</tr>
<tr>
<td>ABOUT FELICITY RYAN</td>
<td>4</td>
</tr>
<tr>
<td>ABOUT THIS RESOURCE</td>
<td>5</td>
</tr>
<tr>
<td>Aim of resource</td>
<td>5</td>
</tr>
<tr>
<td>Resource background</td>
<td>6</td>
</tr>
<tr>
<td>Resource development</td>
<td>6</td>
</tr>
<tr>
<td>Acknowledgments</td>
<td>7</td>
</tr>
<tr>
<td>GLOSSARY OF TERMS</td>
<td>8</td>
</tr>
<tr>
<td>USER GUIDE</td>
<td>10</td>
</tr>
<tr>
<td>Getting started</td>
<td>10</td>
</tr>
<tr>
<td>Completing the review</td>
<td>12</td>
</tr>
<tr>
<td>Assessing the outcome and developing recommendations</td>
<td>14</td>
</tr>
<tr>
<td>Reporting back to those involved</td>
<td>15</td>
</tr>
<tr>
<td>Developing a plan for change</td>
<td>15</td>
</tr>
<tr>
<td>Reviewing the changes</td>
<td>16</td>
</tr>
<tr>
<td>Contact NADA</td>
<td>16</td>
</tr>
</tbody>
</table>
ABOUT NADA

The Network of Alcohol and other Drugs Agencies (NADA) is the peak organisation for the non government alcohol and other drugs sector in NSW. Our vision is a connected and sustainable sector providing quality evidence based programs to reduce alcohol and drug related harms to NSW communities.

We represent approximately 100 organisational members that provide a broad range of services including health promotion and harm reduction, early intervention, treatment and aftercare programs. Our members comprise of services that are diverse in their structure, philosophy and approach to alcohol and other drugs service delivery. NADA provides a range of programs and services that focus on sector and workforce development, information management, governance and management support, sector representation and advocacy, as well as actively contributing to public health policy.

NADA is governed by a board of directors elected from the NADA membership. We are accredited under the Australian Service Excellence Standards.

Further information about NADA and our programs and services is available on the NADA website at www.nada.org.au.

ABOUT FELICITY RYAN

Felicity (Flic) Ryan is a Waddi Waddi woman and her mother’s family are from the Swan Hill and Moulamein areas of Victoria and New South Wales. She also has family connections to the Wemba Wemba people of this area. Flic’s father is of Scottish background and the McMillan family hail from the area below Glasgow in the central lowlands.

Flic has spent 13 years working within both state and local government areas. She is an accredited trainer and now specialises in the development and delivery of high quality face-to-face training packages designed around cultural competency, Aboriginal health and employment, child protection and out of home care.

Flic has worked with NADA since 2011 providing training to NADA member organisations in Aboriginal cultural awareness and strength based practice. She is also a member of the NADA Reconciliation Action Plan Working Group.
ABOUT THIS RESOURCE

This resource comes in two parts. This PDF document, the *Aboriginal Inclusion Tool: A tool to improve Aboriginal inclusion in AOD services—User guide*, and a companion MS Word document, the *Aboriginal Inclusion Tool: A tool to improve Aboriginal inclusion in AOD services—Working document*.

Aim of resource

NADA is committed to the principles of best practice when working with Aboriginal peoples and recognises that improved outcomes rest on the special relationships that can be formed between service users, staff and the Aboriginal community. As a result, this practical tool has been developed to support workers and organisations in improving the inclusiveness of service delivery for Aboriginal people.

The term ‘inclusion’ is used to highlight the need to include people who might otherwise be excluded or marginalised. Terms such as culturally respectful, culturally appropriate, culturally secure, culturally responsive and culturally safe are also used across the sector and have been used throughout the resource.

NADA would also like to acknowledge that this tool is designed to support organisations in reflecting on their inclusion of Aboriginal people. This will be most productive when it is fully supported by the organisation, including incorporation of inclusive practice values and principles throughout the organisation's structure, and with the allocation of resources committed to developing and sustaining Aboriginal inclusive practice.

NADA is in the process of developing its first Reconciliation Action Plan (RAP), to be launched in 2017. The NADA Innovation RAP aims to strengthen our relationships and partnerships, to help foster shared communication across the non government AOD sector, and to increase opportunities for Aboriginal and Torres Strait Islander people within the context of NADA as a peak body and as an organisation committed to culturally secure practice. The NADA RAP will highlight the context in which we work with Aboriginal people and communities in the NSW AOD sector and will support the aims of this resource. NADA member organisations are encouraged to consider this tool as an opportunity to develop or enhance their own Reconciliation Action Plans. For more information on RAPs visit [www.reconciliation.org.au/raphub](http://www.reconciliation.org.au/raphub).

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**Resource background**

This tool enables services to assess the inclusiveness of their organisational practice in working with Aboriginal people and communities. Questions have been designed to be comprehensive considering the four domains:

- **systemic inclusion**—how to create or apply change within the organisation to ensure shared responsibility for better outcomes in relation to Aboriginal people
- **data and service improvement**—how to create culturally responsive programs and services through evidence-based decisions
- **employment and economic involvement**—how to support participation through employment and procurement
- **communication, engagement and partnerships**—how to support partnership and engagement through working with and increasing Aboriginal communities' knowledge of and engagement with services.

These are assessed through measuring a range of service delivery items that attend to respect, relationships and opportunities in line with Reconciliation Action Plan templates. Some questions will attend to more than one of the above domains.

**Resource development**

This resource is a continuous quality improvement (QI) tool. It has been developed to support NADA member organisations to promote ongoing reflection and review, and to monitor their Aboriginal inclusion practices on a regular basis.

Out of respect for the original people of NSW where NADA is based, the term ‘Aboriginal’ will be used throughout this document. Specific data relating to Torres Strait Islander people can be recorded throughout individual services specific documentation.

The original resource, the *KIAP Impact Measurement Tool* (Red Elephant Projects and Department of Justice Victoria, 2013) was a comprehensive tool designed for a large government department in Victoria. It has been reviewed to ensure relevance for a NSW AOD NGO audience. A literature review was undertaken to consider appropriate language use and terminology, content was adapted for smaller service settings and ideas relating to frontline clinical service delivery were added.
Acknowledgments

NADA would like to acknowledge those involved in the development and review of this resource:

- Red Elephant Projects and the Department of Justice, Victoria, for providing permission to adapt the *KIAP Impact Measurement Tool* (2013)
- Felicity Ryan, Connecting Cultures, who carried out a literature review and made recommendations for adaption of the tool for NADA member organisations
- NADA members and stakeholders, who contributed to and reviewed this resource, including staff from:
  - Aboriginal Health & Medical Research Centre
  - Dianella Cottage, The Lyndon Community
  - Kamira
  - NSW Aboriginal Residential Healing Drug and Alcohol Network
  - Reconciliation Australia
  - We Help Ourselves.
GLOSSARY OF TERMS

Aboriginal
The first peoples of Australia.

Aboriginal inclusive
The intention of including Aboriginal people who might otherwise be excluded or marginalised across all elements of service delivery.

ADAN
Aboriginal Drug and Alcohol Network (a network of the AH&MRC).

Advocacy
To seek solutions with and for Aboriginal people to particular problems or needs, so as to enhance their rights and dignity.

AH&MRC
Aboriginal Health & Medical Research Council.

Community
People living in a particular area or people who identify as and/or are seen as a group because of their common interests or nationality and the like.

Consultation
A discussion between relevant people to inform service planning and delivery.

Culturally appropriate
Service delivery that acknowledges the unique set of common values, views or beliefs between Aboriginal people. The terms culturally secure or culturally responsive are also used interchangeably in this resource.

Culturally respectful
Services that are provided in ways that demonstrate respect around a person’s culture and beliefs. The term culturally safe is also used.

Elder
An Aboriginal person who holds cultural knowledge and wisdom around their people. Not necessarily an elderly person.

Holistic
Refers to providing support to a person that takes into account all aspects of his or her life, considering physical and mental health, living circumstances and sense of social connectedness.

Inclusion
The process whereby people (normally excluded or marginalised), who wish to, can access and participate fully in an activity or service. The term inclusive and inclusion are used interchangeably throughout this document.

Local Aboriginal Land Council (LALC)
An Aboriginal organisation that manages local services such as housing, legal affairs, employment, and other day-to-day matters involving Aboriginal people in accordance with the Aboriginal Land rights Act 1983 (NSW).

NADA
Network of Alcohol and other Drugs Agencies.

NAIDOC
National Aborigines and Islanders Day Observance Committee. This acronym has since become the name of the week itself—when people celebrate Aboriginal and Torres Strait Islander culture and, historical and contemporary achievements.
<table>
<thead>
<tr>
<th><strong>NARHDAN</strong></th>
<th>NSW Aboriginal Residential Healing Drug and Alcohol Network (a network of the AH&amp;MRC).</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Quality Improvement (QI)</strong></td>
<td>The process of reviewing and making improvements in an ongoing manner, also referred to as Continuing Quality Improvement.</td>
</tr>
<tr>
<td><strong>Staff knowledge check</strong></td>
<td>A quick survey of staff knowledge on a particular issue, for example to assess if current policy and procedure is fully understood.</td>
</tr>
<tr>
<td><strong>Stakeholder</strong></td>
<td>Any person or organisation with an interest in the operations of a service provider.</td>
</tr>
<tr>
<td><strong>Torres Strait Islander</strong></td>
<td>Peoples belonging to the islands of the Torres Strait (a strait that separates the Australian mainland at Cape York from Papua New Guinea).</td>
</tr>
</tbody>
</table>
Getting started
This section provides guidance on how to prepare your organisation for an Aboriginal inclusion review as part of a continuous quality improvement cycle.

Reflecting on why
As with any project you undertake, it is important to consider why it is you want to complete this review and what it is you are hoping to achieve. Understanding this will help you explain why you are doing this work, and will help you get buy in from your staff and stakeholders.

Complete these few questions to help you consider the why behind your review.

Note: The ‘report’ section of this tool includes a section for you to document your answers.

- Why do you want to carry out this review? What is missing in the organisation?
- What is your organisation’s current position/perspectives on Aboriginal inclusive practice? Do organisational values and principles stimulate and support sustained inclusive practice?
- What do you currently do well in relation to Aboriginal inclusive practice?
- What do you hope to achieve by completing this review? What is the vision for your organisation in relation to Aboriginal inclusion?

Considering what
Before you get started you will need to be clear about what is being reviewed (e.g. is it the organisation as a whole or a specific program). The tool is designed as an organisational tool but it may not be feasible for some larger organisations to take this approach. If this is the case you may choose to only look at a specific program and this means you may have multiple responses to questions in this tool which are marked as ‘don’t know’ or ‘not applicable’.

This shouldn’t be a deterrent though; all services have differing levels of resources to be able to both complete this review and to be able to implement recommendations. Results should be considered in the context of your own service.

Establishing how
This review should be implemented as part of organisation’s quality improvement (QI) cycle. It is recommended that it is repeated every 24 months to allow services to see what areas they have improved in. Your QI leader should embed reminders into QI processes to ensure the tool and the organisation’s action plan is embedded in the QI process. The report, including the completed
review, recommendations and followed up actions can be used as evidence in QI accreditation and in benchmarking.

This is a comprehensive review including sixty questions. It is a great opportunity for your organisation to reflect on current practices and consider readiness for increased inclusion of Aboriginal clients or workers. For example you may want to improve employment and retention of Aboriginal staff—but is your organisation ready to provide support for these workers?

The review process is an important reflective exercise however it will be most beneficial if the organisation is supportive of taking on recommendations, and is able to allocate some resources to implementing recommendations.

To ensure the review is reflective of the organisation’s current practices it is important to ensure:

- management support the activity
- all staff are engaged in the process
- adequate time is allocated for the review (it may take a few days across a number of weeks to complete in full the first time it is carried out)
- staff leading the review are well supported (perhaps a working party or champions can be allocated)
- systems are in place to engage relevant stakeholders.

**Identifying who to engage**

It’s important to remember who it is the review is targeting. The end goal is to improve inclusion of Aboriginal people and communities so it is important to engage key Aboriginal stakeholders in the process. Start by identifying exactly who you need to engage in the process. This might include:

- Aboriginal service users
- Aboriginal staff
- Aboriginal service providers (AOD specialist’s, referral pathway services and broader services e.g. cleaning, catering and contracting providers)
- Aboriginal community members.

Depending on who you engage, and what areas of the review you need consultation on, different strategies for engagement may be taken. A scoping exercise at the project onset will help you have a better idea of what you already have in place.

**Identifying who should lead**

An organisation may have multiple staff members complete the review on behalf of different service areas. To present a collective view, it is recommended that one person is responsible for collating
the review in consultation with other staff, the board and most importantly service users and stakeholders.

It is important to consider who is best placed to provide an independent and consultative review to give meaning to the outcomes and ensure that recommendations are acted on. An external person may be most appropriate, however resources may not permit this. The QI leader or a senior staff member with a passion for quality improvement or a team member who is removed from direct service provision would be ideal to lead the review and champion any recommendations for change.

It is also important to ask any staff in an Aboriginal specific role to be involved in the working group, particularly when focusing on developing recommendations.

**Completing the review**

Once you’ve completed reading all of the user guide section and carried out the reflection questions in the *Aboriginal Inclusion Tool—Working document*, you can move to the review section of the working document and complete the organisation information. The next step is to start reviewing the questions. It is suggested that you move sequentially and complete one section at a time when carrying out the review. The lead reviewer should review all questions and assess what evidence needs to be gathered and identify a plan for engaging stakeholders for their input.

You will find four columns in the audit:

<table>
<thead>
<tr>
<th>Questions and tips</th>
<th>Response</th>
<th>Evidence/comments</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes/no/partially met/NA/don’t know</td>
<td>Include any evidence to support your response</td>
<td>Identify any actions or improvements recommended</td>
</tr>
</tbody>
</table>

**Questions and tips** includes the list of questions for each domain (Respect, Culture and Opportunities). Each question also includes a range of tips (where relevant) in the form of questions and prompts to give you an idea of where you might find the answer or what could be done to respond positively to the question at hand.

**Some starter tips:**

- Remember cultural sensitivity and appropriateness when completing this review.
- Promote the use of culturally appropriate and positive language.
- Be patient when engaging Aboriginal people and community members in the consultation.
- Be mindful of the need to listen, monitor your own assumptions and generalisations; it’s easy to forget yourself and slip into old habits.
- Remind yourself and others why you are doing this and remember change takes time.
How to respond to each question?
You can answer yes, no, partially met, don’t know or not applicable.

<table>
<thead>
<tr>
<th>Response type</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>You can positively respond to the question and provide evidence to support</td>
</tr>
<tr>
<td></td>
<td>that this is an element of your current service provision and/or operations.</td>
</tr>
<tr>
<td>Partially met</td>
<td>You are able to identify some evidence that some work has been done in</td>
</tr>
<tr>
<td></td>
<td>this area but more could be done.</td>
</tr>
<tr>
<td>No</td>
<td>You are unable to identify any evidence for a positive response to the</td>
</tr>
<tr>
<td></td>
<td>question.</td>
</tr>
<tr>
<td>Don’t know</td>
<td>You are unable to find out the required information. It may be that the</td>
</tr>
<tr>
<td></td>
<td>lead reviewer selects ‘don’t know’ on multiple answers on a first run</td>
</tr>
<tr>
<td></td>
<td>through the questions but following up with senior staff, investigating</td>
</tr>
<tr>
<td></td>
<td>policy and consulting with the community will help find a more solid</td>
</tr>
<tr>
<td></td>
<td>response.</td>
</tr>
<tr>
<td>Not applicable</td>
<td>The question does not apply to your service (for example when only</td>
</tr>
<tr>
<td></td>
<td>focusing on a service area rather than the organisation as a whole).</td>
</tr>
</tbody>
</table>

Note: If stakeholders (e.g. staff and clients) are unable to agree on a common response to a question the lead reviewer will have to consider the evidence available before selecting a response. As a guide the reviewer should never select yes unless all relevant parties agree and the evidence is there to support this response.

Documenting evidence
Whatever your response you can document evidence to this answer in the third column. A good way to document the evidence is to reference it and provide a hyperlink to its location on your shared drive so all staff can have access to the information.

Recommendations
Use the ‘recommendations’ column to identify where improvements are needed. It can be helpful to jot down ideas as you go instead of waiting to develop recommendations when the full review is complete. You may also want to identify here what actions and resources may be required to meet the recommendation/s.

Note: The review should be used as a working document to identify ideas and progress on questions until it is finalised and the report section is completed and signed off.
Assessing the outcome and developing recommendations

On first application of the review you may find that multiple questions have been responded to with a 'partially met', 'no' or 'don't know'. It is important not to be overwhelmed by this as this tool is designed to help you identify a whole range of factors that can increase Aboriginal inclusion in your service that you may not have considered before. It is a whole of service response and it can help your staff start thinking about improved engagement across the whole organisation.

Scoring

Each question is worth a maximum of 2 points, the total possible score being 120.

<table>
<thead>
<tr>
<th>Area</th>
<th>Total number of questions</th>
<th>Total possible score</th>
</tr>
</thead>
<tbody>
<tr>
<td>A: Respect</td>
<td>26</td>
<td>52</td>
</tr>
<tr>
<td>B: Relationships</td>
<td>24</td>
<td>48</td>
</tr>
<tr>
<td>C: Opportunities</td>
<td>10</td>
<td>20</td>
</tr>
<tr>
<td>Total</td>
<td>60</td>
<td>120</td>
</tr>
</tbody>
</table>

Scores are based on responses for yes, partially met, no and don’t know and should be graded based on all applicable questions.

<table>
<thead>
<tr>
<th>Response</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>2</td>
</tr>
<tr>
<td>Partially met</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>0</td>
</tr>
<tr>
<td>Don’t know</td>
<td>0</td>
</tr>
</tbody>
</table>

For any not applicable questions the total possible score should be reduced by 2.

E.g. X organisation identified 2 not applicable questions in section A and 1 not applicable questions in section B their total possible score is reduced:

Total possible score for section A: $52 - (2 \text{ questions} \times 2 \text{ points}) = 48$

Total possible score for section B: $48 - (1 \text{ question} \times 2 \text{ points}) = 46$

Total overall score = total possible scores for $A + B + C$

= $48 + 46 + 20$

= $114$
**Note:** If you or your staff become overwhelmed, go back to the ‘why’ of why you are doing this and consider how you can balance this vision while acknowledging that resources are limited and that change takes time. And remember that small changes can have big impacts.

**Reviewing the outcomes**
The QI or senior team meetings can be a great place to start to discuss outcomes and help to identify the next steps. It is also important to ask those involved in the consultation what they think about current processes and what ideas they have for positive change.

When reviewing the outcomes of the review as a whole:

- Document ideas for improvement.
- Pursue answers to questions where the answer is ‘don’t know’.
- Identify:
  - What can be done within available resources?
  - What can be done within the short, medium and long term?
  - What can be done in different parts of the organisation?
  - What big impact can be created with little effort?

**Reporting back to those involved**
As part of consultation with the board, staff, clients and other stakeholders it is important that a feedback process is embedded. This includes providing a report on the outcomes of the full review and/or specific elements of the review, and discussing what recommendations are being put forward for change.

This is also a great opportunity to get input on what areas should be prioritised for change in the next 12–24 months, as it won’t be possible to make change on all items at the one time.

Remember to inform those involved of the final priorities and engage them in a follow up review at a later date.

**Developing a plan for change**
Developing a plan includes identifying priority areas and activities and who can lead these activities. Organisations should aim to commit to at least two or three priority activities over the review period and should look at improvements impacting on different parts of the organisation.
The ‘tips’ in the questions section of the review can help identify where to start progressing improvements in different priority areas, while the ‘outcomes and recommendations report’ section and the ‘action plan template’ can help document your organisational plan for the next 12–24 months.

**Reviewing the changes**

As with any QI process it is important to review any changes implemented after a period of time. So be sure to embed review timeframes into planning, and schedule in a date for the next full review as part of the organisational QI schedule.

**Contact NADA**

For further information, or to provide feedback on the tool, contact NADA.

**Network of Alcohol and other Drugs Agencies**

PO Box 2345, Strawberry Hills NSW 2012  
**T** 02 9698 8669  
**E** feedback@nada.org.au  
**W** http://www.nada.org.au