## NT Jurisdictional TIS Workshop



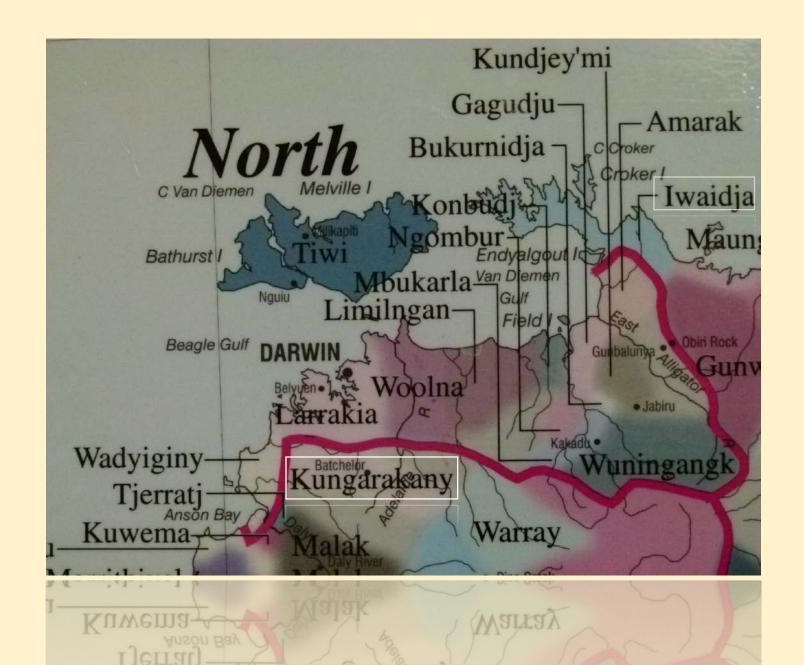


Darwin 15 August 2019



## **Prof Tom Calma AO**

National Coordinator Tackling Indigenous Smoking



## TIS Family 2019





TIS CEO Workshop

8 May 2019



#### Tackling Indigenous Smoking Program

Final Evaluation Report

Prepared for the Australian Government Department of Health July 2018



## **Evaluation**

## Recommendations

#### Community engagement and partnerships

Regional grant recipients: Continue involving community members in the design, delivery
and evaluation of local TIS programs and sustain use of partnerships to broaden reach,
strengthen referral pathways, and support other program objectives including preventing
uptake, promoting expansion of smoke free spaces, and changing social norms.

#### Localised health promotion

- Regional grant recipients: Continue delivering targeted, multi-level, tobacco-focused health promotion.
- NBPU TIS: Provide additional training and information on best practice, multi-level, tobaccofocused health promotion for targeted groups including pregnant women.

#### Overarching TIS program

- 17. **Department:** Continue the delivery of the TIS program.
- 18. Department: Commit to funding longer term (at least 4 years) and provide immediate advice about future funding to minimise funding uncertainty and associated staff turnover and underspend.

## Stability and impactful



## The revamped TIS program will:

- Continue the successful Regional Tobacco Control grants scheme including school and community education, smoke-free homes and workplaces and quit groups
- Expand programs targeting pregnant women and remote area smokers
- Enhance the Indigenous quitline service
- Support local Indigenous leaders and cultural programs to reduce smoking (quitskills)
- Continue evaluation to monitor the efficiency and effectiveness of individual programs, including increased regional data collection

https://www.health.gov.au/internet/ministers/publishing.nsf/Content/health-mediarel-yr2018-wyatt012.htm

11 February 2018

## Extract from letter that went to Grant Recipients in March 2018

**For the TIS program going forward,** there will be specific requirements for TIS organisations, namely all **will be required to:** 

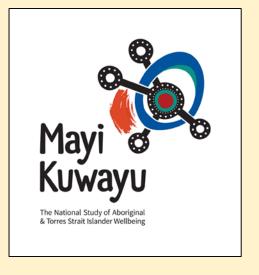
- prioritise evidence-based population health approaches with maximum reach within their identified TIS region;
- ensure that Indigenous people who do not attend Aboriginal Community
  Controlled Health Services (ACCHS) or Aboriginal Medical Services (AMS') are
  targeted and reached; and
- provide evidence of how their primary health care funding (where provided by the Commonwealth) is being used to complement TIS activities as part of a larger mix of tobacco cessation interventions.

- All Grant Recipients will be reminded that a condition of receiving TIS funding is for staff to attend;
  - Their state or territory jurisdictional meetings
  - National meetings of TIS workers, and
  - CEO workshops
- As appropriate, GRs will be asked why their CEO or senior staff did not attend the CEO workshop or the TIS workers, the national workshop.
- ► Funding for participation is built into GR funding.

#### **Overview of TIS Program processes** NATIONAL EVALUATION PERFORMANCE INDICATORS FOR TIS **NATIONAL** Community action, engagement and advocacy National **NBPU-TIS TIS TEAMS** COORDINATOR **Evaluators FOR TIS** Designing, delivering, monitoring, evaluating (Part A: and continually improving a range **CIRCA** (NCTIS) Part B: of tobacco population health promotion activities as defined by an agreed Action Plan ANU) **TIS PROGRAM REGIONAL** Supporting TIS teams and workers to: **GRANT** Leadership. · achieve their objectives **Enabling** strategic · build and maintain their skills and **RECIPIENTS** access of direction and knowledge and **TIS Teams** attend key workshops and other advice to to highevents organised by NBPU-TIS support the quality effectiveness information, of the Program knowledge. National \..../ advice and evaluation support for their work Performance **Puitskills** Partnership reporting working Grant administration Community and compliance Grants Hub Continuous State and Territory Improvement Cycle **Departments** Commonwealth of Health Policy and Government Program Relationship Department of Health design building



# Evaluating the impacts of TIS regional grants on smoking outcomes



#### Ray Lovett & Katie Thurber

Aboriginal and Torres Strait Islander Health Program
Research School of Population Health,
Australian National University

https://mkstudy.com.au/the-survey/



## Issues raised by TIS Workers to discuss at the CEO Workshop

#### Increased TIS awareness

- CEOs and Managers need to be more awareness about the TIS Teams roles, requirements
- CEO understanding of TIS expectations around branding/ co-branding/ stand-alone branding and using TIS resources within the AMS

## Improved communication

- Timely communication please often people on the ground experience delays in receiving communication/ updates due to delays through many levels within the organisations. E.g.: reporting templates, approvals etc.
- Communicate information from CEO's meeting to TIS teams re: what was said etc. or NBPU to add in their newsletter
- Ensuring continuity of staff by clear roles, funding requirements / limitations

## CEOs / Grant Recipients to consider

## Delivery Limitations

- Restricted weekend work impacts on service provided
- Restrictions on leaving office aren't allowed to attend events
- Capacity to hold weekend events
- Insists the TIS Team to continue one-on-one delivery sessions instead of population health

## Scope of delivery

- Re-classification of remote to recognise extremely remote locations
- Define region of delivery
- Title TIS Educators or Officers
- Attend other outlying communities within shire regardless of ACCHO borders

## **Issues for CEOs**

## Funding/Budgets

- More access/ knowledge of TIS Budget
- TIS Team more ownership and control over budget not the AMS Business Manager
- Funding being used for other programs ie people be paid salary from TIS \$\$s when they aren't in the TIS Team
- Advise budget to TIS workers on the ground. This will help TIS Workers to plan events

#### Resources

- Better phone software
- Humbugging for TIS Resources
- Internal / Social media access / access to social marketing tools. E.g.: Facebook
- Re-classification of remote to recognise extremely remote locations

## Issues for CEOs / NBPU / DoH

## Partnerships/collaboration

- State/ Territory-based:
  - collaboration
  - partnerships
- TIS Collaboration resources/ working together (like WA)
- Integration of TIS throughout all services ie sexual health, Mums and Bubs etc
- Co-ordinated approach State level i.e. state carnival, share finance
- Can we have more partnerships with other TIS teams in our State?
- Work across regions with similar challenges

## Issues for CEO, DoH and NCTIS

#### Other

- More support for TIS Teams and modelling the message walk the talk, enforce
  policies ie how can we stop smoking in our own organisation in uniform, clock off
  for breaks etc.
- Increase Aboriginal and Torres Strait Islander employment
- Population Health approaches
- More opportunity to attend conferences for broader learning and widening perspectives and networking
- Drive strategic strategy planning so momentum is developed and maintained
- Evaluation framework asap in consultation with grant recipients
- Lobbying CIRCA/ NBPU/ DoH for feedback on TIS Programme performance/ reporting/ national directives
- Lack of report feedback
- Clarity on / position of scope of delivery

## Policy Advice – TIS Workers in prisons and detention centres

#### **Formal Advice**

- "...it is Constitutionally permissible for TIS to be delivered in prisons but IAHP\* guidelines states that only to Indigenous prisoners".
- "TIS policy is currently that it is permissible if we know that the states/territories aren't doing anything in this space, and the TIS team can demonstrate that this is a priority population group for them ..."
- DSS Hub Managers have been advised of this policy advice re
   Commonwealth funded workers being able to deliver TIS in prisons
- \* Indigenous Australians' Health Programme

## **Policy Advice** – TIS Workers in **prisons** and **detention centres**

## **Response for TIS activities**

- Activity in prisons must still be POPULATION HEALTH focussed with referral to Quitline etc
- All current rules for TIS funding still apply
- Encourage other agencies to join the prison visits ie state and territory govts, ACCHOs, Cancer Councils and Quitline etc
- Establish clear referral procedures with the prison health staff
- Utilise NBPU videos where permitted
- Ensure that prison visits do not distract from other TIS outreach community activities

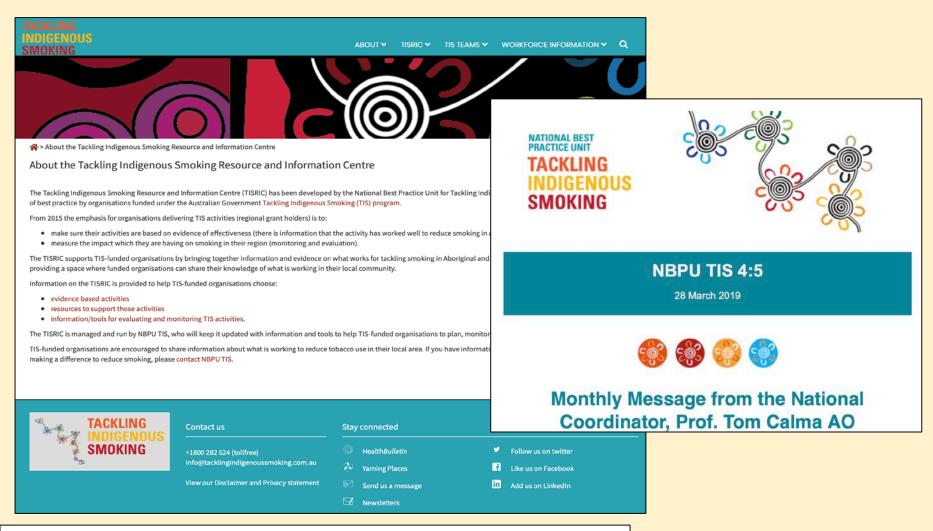
## Collecting data and monitoring and evaluating activity

#### **Present**

- If not already in Activity Plans ensure prison activity is in the next plan
- Report on activity ie numbers, referrals etc
- Endeavour to identify smoking behaviour post release
- Department will advise state and territory government stakeholders through National Expert Reference Group on Tobacco (NERGOT) and Tobacco Policy Officers Group (TPOG)

#### **Future**

- The Department will work with CIRCA to:
  - Identify how TIS prison activity is evaluated, and
  - Identifying the outcomes of referrals



http://tacklingsmoking.org.au/about-the-tackling-indigenous-smoking-resource-information-centre/

## Monthly TIS Communique

- targeting major partners in govt and NGO sector working on tobacco control
- won't duplicate the NBPU newsletter or the National Coordinators
   Monthly Message but will draw from both
- the targeted partners are also invited to contribute
- Develop better coordinated and targeted activity and allow for collaborative strategies and initiatives
- Enable team leaders and grant recipients to speak with authority and conviction at state and territory coordination meetings

## **National Housing Conference**

Housing future communities

27-30 August 2019 | Darwin





## WORLD INDIGENOUS CANCERCONFEREN



**Development Opportunities** 



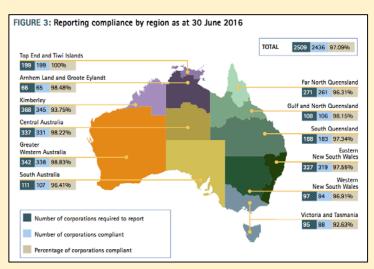
## Innovation and Impact

# Smoke free homes & community areas



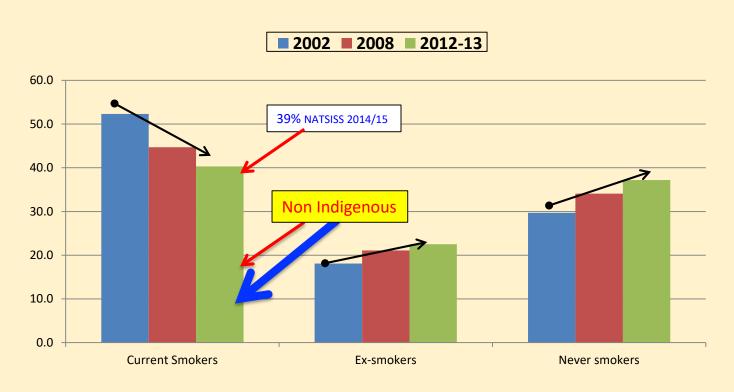
Apunapima TIS Team at Napranum FNQ

## Smoke free workplaces



ORIC Yearbook 2015/16
Pg 17

## Aboriginal and Torres Strait Islander Smoking



Source: ABS Aboriginal and Torres Strait Islander Health Survey 2012-13