



National Best Practice Unit –
Tackling Indigenous Smoking

**NATIONAL CEO
WORKSHOP REPORT**

25 May 2021

June 2021

Introduction

The Tackling Indigenous Smoking (TIS) jurisdictional workshops are an important way in which the National Best Practice Unit Tackling Indigenous Smoking (NBPU TIS) provides support to the TIS teams located in the Regional Tobacco Control Grant (RTCG) organisations.

The workshops aim to:

- promote an evidence-based approach to tackling smoking in Aboriginal and Torres Strait Islander communities;
- share best practice of 'what works' and develop a community of practice amongst TIS teams (peer-to-peer learning and network building);
- provide a forum for resolving implementation challenges;
- provide training and tools to assist TIS teams in program delivery; and
- ensure a shared understanding of the TIS program

There are six jurisdictional TIS workshops per year, plus one national TIS workshop for CEOs and TIS coordinators per year¹.

The National CEO Workshop

Usually TIS workshops are held face-to-face in a major centre. Unfortunately, the COVID-19 pandemic made this difficult for the CEO Workshop, with many Grant Recipient organisations uncertain about interstate travel. The Workshop was therefore held by videoconference (Zoom). The workshop was held on its planned date of 25 May but was shortened to a half-day (3 ½ hours) to fit the online format.

Program

See [Attachment A](#) for an outline of the program as distributed to participants ahead of the workshop.

Summaries of the Workshop sessions are as follows – please see participant presentations on the Jurisdictional Workshop presentations page of the TIS Website² for details.

1. Acknowledgement of Country, Introductions and Workshop Guidelines (Eileen Van Iersel, Manager NBPU TIS)

2. TIS National Coordinator Update (Prof. Tom Calma)

Prof. Tom Calma provided an update on the TIS program and reminded participants that the current funding contract ends in June 2022. There are forty (40) teams funded nationally for 4 years, and Prof. Tom posed the question, 'What are we here for'? Our focus is population health – smoking cessation is for the AMS to focus on. He observed that some of the key issues in some TIS programs included ensuring that TIS Coordinators being provided with the TIS budget in organisations, recruitment, and understanding contractual obligations including obligations to attend the CEO workshops. Prof. Tom also

¹ The workshops for New South Wales and the Australian Capital Territory, and for Tasmania and Victoria are combined.

² See <https://tacklingsmoking.org.au/resources/jurisdictional-workshop-presentations/>.

stated that data is showing TIS is making an impact with the cessation of smoking but can improve in regional and remote areas.

3. Department of Health Update (Anita Dwyer, Assistant Secretary Health Plan, Early Years, and Engagement Branch)

Ms Dwyer updated participants on the TIS program from the perspective of the Department of Health, including on:

- how tobacco use is tracking against 'big picture' goals;
- the emerging priorities and policy context, including the National Agreement on Closing the Gap, the draft National Aboriginal and Torres Strait Islander Health Plan 2021-2031, the draft National Preventive Health Strategy, and the National Tobacco Strategy 2020-2030 (in development); and
- key priorities for TIS (demonstrating impact and maximising impact)

4. Mid-term Evaluation of the TIS Program (Lena Etuk, Manager, Research & Evaluation CIRCA)

CIRCA reported on the findings of the mid-term evaluation of the TIS Program which will be released once considered by the Department of Health. The evaluation has looked at the implementation, appropriateness and outcomes of the TIS programs, and has made several recommendations about how to improve its effectiveness.

5. Breakout Rooms: Identifying and Growing Sustainable Wise Practice for TIS (A/Prof. Penney Upton, University of Canberra)

This session provided an opportunity for CEOs to explore from their perspective the activities TIS teams are doing, what is working and what support teams might need to ensure sustainable Wise Practice for TIS.

Participants were randomly assigned to one of four Zoom breakout rooms, each led by NBPU TIS facilitators. Each group discussed the following four broad activity areas:

- Promoting and supporting smoke free environments;
- Capacity building for quitting;
- Social media activities;
- Partnerships.

See [Attachment B](#) for a report on the outcomes of the Break Out sessions including potential actions that NBPU TIS can take to Grant Recipients over the next 12 months

6. Supporting continuous quality improvement (CQI) of tobacco control in health services in the NT (Prof. David Thomas, Menzies School of Health Research)

David presented on his work with the Aboriginal Medical Services Alliance Northern Territory (AMSANT) and the Northern Territory Aboriginal Health Forum (NTAHF) on developing a CQI guide for remote health services.

7. TIS Program Impact Evaluation Update (Dr. Raglan Maddox, Australian National University)

This presentation was delivered by Raglan Maddox from the Australian National University (ANU) about the impact evaluation being conducted by the Australian

National University of TIS regional grants on smoking outcomes. Raglan reported that Smoking rates are declining for Aboriginal and Torres Strait Islander people but there is still room for improvement. The ANU team is working with TIS teams to measure the impact of the TIS program on smoking rates, attitudes to smoking and exposure to smoking

8. Update on the TIS Website (Ashleigh Parnell, Indigenous HealthInfonet)

Delivered by Ashley Parnell who provided the workshop with information showing that usage of the website and yarning circle are both improving. A recent survey was done for the National TIS Workers Yarning Group.

New factsheets and infographics have been included on the website, including an Induction pack for new TIS workers and on e-cigarettes; smoking and stress; Quitskills; Quitline; and social media.

9. NBPU TIS Update (Eileen Van Iersel, Manager NBPU TIS)

Eileen introduced the project team and their jurisdictions. COVID-19 has impacted on the way we do business, and the team are unable to visit communities deemed remote or very remote under the government's travel risks but we have continued to support the teams via zoom, phone, and emails while encouraging teams to use the TIS website for other resources.

A recent survey done by NBPU found teams are zoomed out and would like more face-to-face engagement. It can be difficult to experience what TIS Teams are doing in their communities when using virtual means of communication.

2021, Jurisdiction workshops will be face-to-face unless there is a COVID risk that will impact and alternatively, a virtual workshop will be organized. a plan B, (virtual) workshop will be activated if covid impacts.

10. Reflections on the workshop (Prof. Tom Calma /

Key points from the workshop included:

- acknowledging the important work that the TIS teams are doing around Australia, in Tackling Indigenous Smoking;
- TIS Programs are into the 4th and final year of the current TIS contract, GR's need to understand their contractual obligations.
- TIS Coordinators should have vision of the TIS Budget
- the importance of capturing, implementing, and disseminating information – build the collection data into practice.
- CEO's must attend the CEO workshops, they are held once a year, CEO's need to commit.

Attendance

The workshop was attended by 54 participants, including 38 representatives from 31 out of the 39 Grant recipients from across Australia. See [Attachment C](#) for a list of participants. Note that names in this list are based on registrations and as they appeared through Zoom. While the names of organisations are correct, there may be some variation in the actual managers / Board members attending.

Participant Evaluation

Each TIS workshop includes participant evaluation, with both quantitative and qualitative feedback. This assists the NBPU TIS to ensure that future workshops are of most use to Grant Recipients and their TIS teams.

Participant evaluation feedback was collected using an online survey platform (Qualtrics). Response rates for those online may be lower than for those attending face-to-face, partly because multiple attendees at one video location are likely to give one response, and partly because it may be difficult for participants to find the time to respond once they leave the workshop and return to their busy workplaces.

NBPU TIS gave regular reminders to complete the survey at the end of each presentation, and again at the end of the workshop to increase evaluation response rates. A total of 17 responses to the survey were received. The majority provided positive and constructive feedback.

When asked to rate the workshop on a scale of 1-10, the majority rated the workshop at least 7/10, with almost half (42%) rating the workshop 10/10 (see *Figure 1*). Only one person (8%) rated the workshop less than 7/10, giving a score of 1/10.

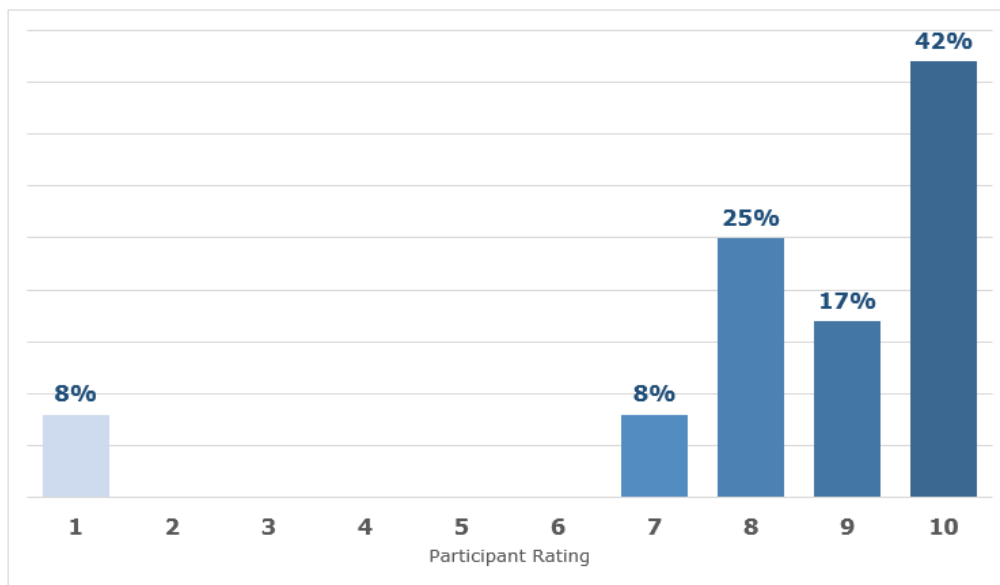


Figure 1: Participant rating of National CEO workshop (scale of 1 to 10)

All sessions were well received by the majority of survey respondents, however the session with the highest rating was the interactive breakout room discussion, which was rated as very useful by 82% of respondents (*Figure 2*).

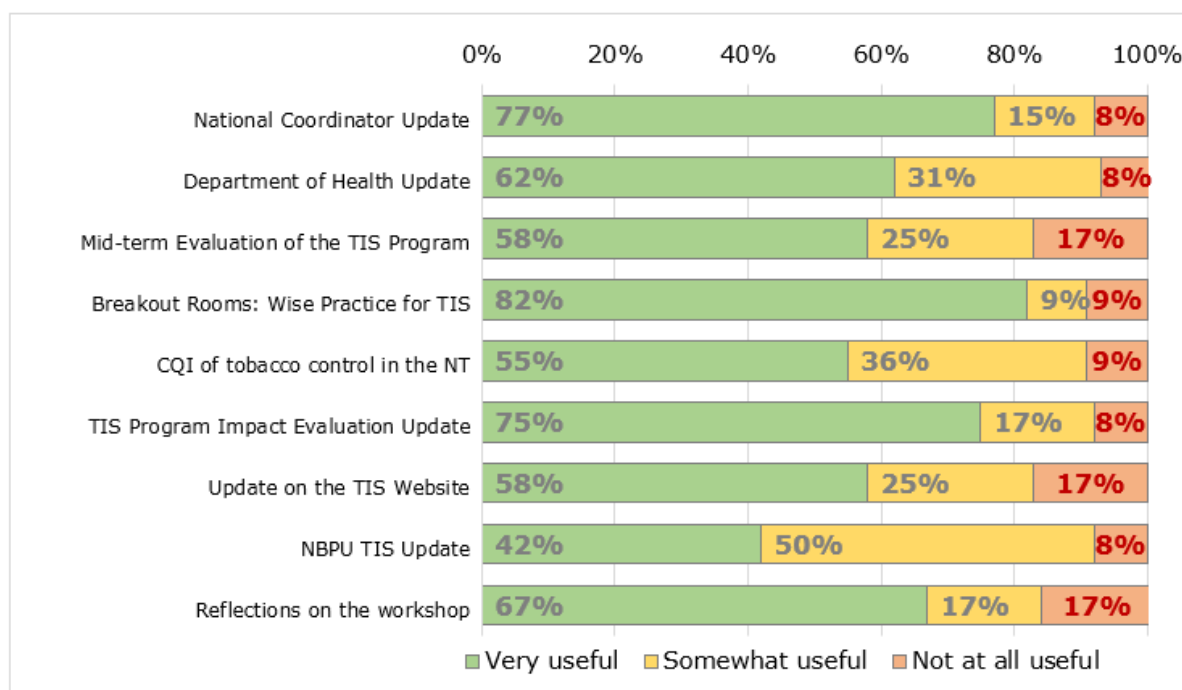


Figure 2: Participant evaluation of National CEO workshop sessions, May 2021

Overall most participants who responded to the survey were very satisfied with the workshop content (85%), with the remainder split between somewhat satisfied (8%) and not at all satisfied (8%).

Half of the respondents were also happy with the length of sessions (50%), with the majority of the remaining respondents being somewhat satisfied (42%). Only 8% (one respondent) were not at all satisfied with the length of sessions. Almost two thirds of respondents were happy with the overall length of the session (64%), whilst the remainder were split between somewhat satisfied (18%) and not at all satisfied (18%).

Feedback on the workshop covered a number of topics including technical and practical issues related to running an online workshop:

My apologies. Had a computer failure just as we headed into the breakout!

Audio and visual and sound was up and down throughout the workshop

Challenge is the length of the workshop when its online

Most feedback about the workshop sessions was positive and included comments on the content:

great [to] the see the work being done about data collection

The opportunity to hear what others are doing is inspiring and should make up the majority of the CEO workshops

as well as the running of the workshop:

Thx for keeping to time. Well run

How well done it was via Zoom including the break out rooms!

The breakout rooms were highlighted as the best part of the workshop by five participants, whilst others nominated the overall engagement and having updates around what is happening in TIS:

David Thomas presentation

Seeing everyone and hearing about great work

The session by Dr Raglan Maddox

The updates from each of the key areas were very beneficial

Tom's highlighting of key points e.g. underspending!!

Engagement

One team was also keen to have further discussion around any future funding and the way the other TIS elements might be positioned within States and Territories:

[Our organisation] would be very keen to have the TIS program extended and look ... to coordinate the program state-wide including through our RTO lead the Quitskills across the state and Australia if required. Happy to expand further

When asked 'What one thing would you have changed about the workshop suggestions included:

1. Early access to speaker presentations:

Having notes/powerpoints available prior to the presentations

Immediate access to the presentations would be good, either beforehand or in a Dropbox link straight after

2. More flexibility around attendance:

Maybe the opportunity to jump on for specific sessions.

3. Suggestions on expanding content:

would be good to hear from agencies and their activities

4. More discussion, for example in the breakout rooms:

Longer opportunity in break out room and feedback to the whole group following

More breakouts

More discussion, esp with the department

5. Less discussion:

I would have not had the breakout sessions. They are still more useful for the operational TIS staff.

Finally, one participant was very unhappy with the workshop stating:

Worst workshop sorry to say. Just repeating again on info we know all ready. CEO's don't care about TIS, they just want to know if the program will be funded again

or not. Tom should be giving all the teams directions, tell us where we need improving but highlight areas of success. What's the plan for the next 12 months from the national coordinator?

The same participant also provided the following feedback when asked what they would change about the workshop:

Everything. What's the national plan from the national coordinator? Where was he during covid? This workshop would have been better if all TIS managers with their CEO's to sit with Tom and address a national plan for keep TIS alive especially during COVID. Tom need to tell us what area we need improving and areas to invest more from a national point of view.

ATTACHMENT A: Workshop Program

Tackling Indigenous Smoking National Workshop Program

Tuesday 25th May 2021

ZOOM Meeting ID: 973-6314-3959

PASSWORD: 923563

Sir Stamford at Circular Quay
93 Macquarie Street, Sydney

START TIMES:

WA – 9:30am

SA & NT - 11:00am

QLD, NSW, ACT, VIC & TAS – 11:30am

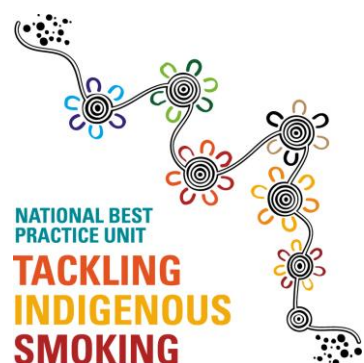


Duration	Session	Facilitators/Speakers
START TIME 11:00am (SA)		
10 mins	<ul style="list-style-type: none"> ○ Welcome and Acknowledgement of Country. ○ Introduction of the NBPU TIS Staff, National Coordinator, DoH and Consortium Members. ○ Zoom Workshop Guidelines. 	Facilitator - Eileen Van Iersel Manager NBPU TIS
5 mins	<ul style="list-style-type: none"> ○ Roll call of Registered Participants and Apologies. 	Kelly Franklin NBPU TIS
30 mins	<ul style="list-style-type: none"> ○ Latest Update for the TIS Program. ○ TIS TAG. ○ Communications. ○ Observations on the TIS Program and Key Issues Impacting on the TIS Programs. ○ iSISTAQUIT Partnerships. 	Prof. Tom Calma AO National Co-ordinator TIS
30 mins	<ul style="list-style-type: none"> ○ Program Update. ○ Q&A. 	Matilda Jureidini A/Director Child and Family Health Section, Indigenous Health Division Department of Health
15 mins	<ul style="list-style-type: none"> ○ Mid-term Evaluation of the TIS Program ○ The Evaluation focuses on assessing the implementation of TIS as well as some short- and medium-term outcomes. 	Lena Etuk Manager, Research & Evaluation Cultural & Indigenous Research Centre Australia
10 mins	VIDEO CONFERENCE BREAK	

Duration	Session	Facilitators/Speakers
45 mins	<ul style="list-style-type: none"> o 'Identifying and Growing Sustainable Wise Practice for TIS'. o What do we know is working for TIS and how do we maintain the momentum? o Interactive session to include 3-4 breakout groups (10 mins). 	A/Prof. Penney Upton University of Canberra
10 mins	<ul style="list-style-type: none"> o Supporting Continuous Quality Improvement (CQI) of Tobacco Control in Health Services in the NT. 	Prof. David Thomas Menzies School of Health Research
10 mins	<ul style="list-style-type: none"> o Tackling Indigenous Smoking Impact Evaluation Update. 	Dr. Raglan Maddox Australian National University Canberra
5 mins	<ul style="list-style-type: none"> o Update on the TIS Website. 	Ashleigh Parnell Indigenous HealthInfonet
10 mins	<ul style="list-style-type: none"> o Working at a distance (remote, very remote). o Reporting. 	Eileen Van Iersel Manager NBPU TIS
15 mins	<ul style="list-style-type: none"> o Reflections on the messages from the Workshop. o Q&A and wrap up of the Workshop. 	Prof. Tom Calma AO National Co-ordinator TIS
WORKSHOP CLOSE		

SESSIONS TIMES	WA	SA/NT	QLD/NSW/VIC/TAS/ACT
Welcome	9:30	11:00	11:30
o Welcome and Acknowledgement of Country and Workshop Guidelines.	9:30 - 9:40	11:00 - 11:10	11:30 - 11:40
o Roll call of Registered Participants.	9:40 - 9:45	11:10 - 11:15	11:40 - 11:45
o Latest Update for the TIS Program.	9:45 - 10:15	11:15 - 11:45	11:45 - 12:15
o DoH - Program Update and Q&A	10:15 - 10:45	11:45 - 12:15	12:20 - 12:45
o Mid-term Evaluation	10:45 - 11:00	12:15 - 12:30	12:45 - 13:00
MORNING TEA BREAK	11:00 - 11:10	12:30 - 12:40	13:00 - 13:10
o Identifying and Growing Sustainable Wise Practice for TIS.	11:10 - 11:55	12:40 - 13:25	13:10 - 13:55
o Supporting Continuous Quality Improvement (CQI).	11:55 - 12:05	13:25 - 13:35	13:55 - 14:05
o Tackling Indigenous Smoking Impact Evaluation Update.	12:05 - 12:15	13:35 - 13:45	14:05 - 14:15
o Update on the TIS Website.	12:15 - 12:20	13:45 - 13:50	14:15 - 14:20
o Working at a Distance.	12:20 - 12:30	13:50 - 14:00	14:20 - 14:30
o National Co-ordinator. o Reflections on the messages from the Workshop and wrap up.	12:30 - 12:45	14:00 - 14:15	14:30 - 14:45
WORKSHOP CLOSE	13:00	14:30	15:00

Attachment B: Report from 'Break Out Sessions' at TIS National CEO Workshop, 25 May 2021



Identifying and Growing Sustainable Wise Practice for TIS

Two years ago, in Adelaide at the CEO workshop, NBPU TIS undertook an activity called 'Good Practice for TIS CEOs/Board members' the aim of which was to gather CEO perspectives on the sorts of activities TIS teams were engaged in at the time. This was in the early days of the second round of funding and the focus was very much on what teams were doing/planning to do, to help NBPU TIS get the CEO perspective of what was happening on the ground, with the intention that this would enable the development of more tailored support for RTCG recipients and their TIS teams. Having reached a crucial point in the funding cycle, NBPU TIS were keen to revisit this activity. In 2019 it was suggested by some CEOs that this activity was better suited to TIS team co-ordinators. With this in mind the activity was reframed to focus more on activities described in the AWP that could benefit from organisational support to succeed. This session therefore provided an opportunity to explore from a CEO perspective the activities TIS teams are doing, what is working and what support organisations might need to maintain effective activities and refine population health promotion action to ensure sustainable Wise Practice for TIS.

Workshop participants were randomly assigned to one of four Zoom breakout rooms, each led by NBPU TIS facilitators. Each group spent 30 minutes discussing the following four broad activity groups identified from AWP and recent performance reports as being key for TIS teams and benefiting from Organisation level input:

- Promoting and supporting smoke free environments, including at RTCG organisations;
- Capacity building for quitting (facilitating or providing non-TIS team staff with training, promoting and strengthening referral pathways)
- Social media activities (marketing campaigns)
- Partnerships (building and maintaining relationships with other organisations and services as well as relationships within organisations)

Key questions considered for each activity were as follows:

1. What support does your organisation provide to your TIS team for this activity?
2. Do you think this activity is working? (why/why not/what evidence do we have?) If not what needs to change for it to be effective?
3. Re successful activities: Do we need to collect any further evidence to show this is wise practice or do we just need to prioritise sharing this knowledge (eg more success stories). How might NBPU support you with this – eg sharing knowledge through sharing identified best practice stories of positive outcomes, training to develop M&E practices etc?
4. Is there anything else that we need to do from your perspective as CEOs to ensure sustainable wise practice?

The group discussions showed that Population Health Promotion was seen to be working really well in the main, although some RTCG organisations were mindful of the need to think more about how to link the evidence to what is working in communities. The impact of COVID19 and

the challenges posed with the cessation of activities was noted by some CEOs. The focus for a number of teams during this period had moved to delivery of COVID19 services (rather than TIS services) while others focused on promotional activities including using ambassadors and social media to promote TIS. Some felt that often teams were working twice as hard and getting less outcomes during this period. However, a great many success stories were also shared by CEOs for each of the four key activity areas.

Promoting and supporting smoke free environments

A number of CEOs described success in supporting smoke free environments (both homes and workplaces). In particular success was seen to arise from:

- Leading by example –RTCGR organisations being smoke free and led by a CEO who does not smoke;
- Reinforcing the smoke free living message to other organisations;
- Teaching all RTCGR staff about not smoking, using strengths-based action to emphasise the message (eg staff sports competitions);
- Working with local government agencies to get the message out widely (this has led to one team being approached by services and hospitals for smoke free signage);
- Community programs that offer ongoing support to families to work towards smoke free homes;
- Further supporting this messaging via social media campaigns and health education.

CEOs noted that it can be a challenge getting a response from organisations outside of health to go smokefree – for example mining companies, councils, non-health ORIC organisations.

Capacity building for quit

The benefits of accessing Quitskills training for increasing the capacity of RTCGR organisations and other services to support quit was noted across the groups. Quitskills training was seen to be beneficial for:

- TIS team staff;
- Other health workers/practitioners with community contact (e.g. GPs, pharmacists).

Although the training from Quitskills was seen as very beneficial, the length of the training package (3 days) was seen as a barrier to uptake. A 'train the trainer' model described by one team was seen as a possible solution to this challenge, as the team was now able to offer training at many levels and across services at times convenient to organisations. The model was seen to be working well in that region.

Future work being undertaken by one organisation included developing the TIS component to the Aboriginal Health Practitioner training. It was noted that this would need a conversation with other ACCHOs across the country to come up with an agreed message for the training roll out.

Social marketing (including social media)

The use of a range of social marketing methods from traditional radio/newspaper ads to contemporary social media campaigns were believed to have worked well throughout the COVID19 lock down last year. In particular success was achieved through:

- TIS team taking ownership of their social media channel and growing the audience through a local focus;

- Including contemporary messages (eg COVID safety) with the tobacco control messaging;
- Using Competitions & Quizzes to keep the audience engaged in social media messaging;
- Continuing to use traditional media in remote areas (e.g. TV, radio and Billboards), since network access remains a barrier to social media campaigns in some areas;
- Having messaging that is locally relevant and in language, however it is broadcast.

CEOs talked about the need to ramp up messages for social media and social marketing campaigns this year and were keen to have help from NBPU TIS to do this.

Partnerships with other services

It was noted that sometimes AMSs are reluctant to engage in linkage to Population Health programs so TIS Teams tend to focus primarily on other linkages and partnerships including:

- Sports teams;
- Youth programs to target young people from primary through to secondary school;
- State government departments (eg health, education);
- Cancer Council/ Quitline;
- Schools and playgroups;
- Other health services and linked programs (e.g. pharmacists, GP clinics, mum and bub groups);
- Other TIS Teams.

Success was seen to come from aligning events and programs using a strength-based approach to collaboration to deliver messages.

One CEO noted that collaboration with Quitline could be challenging since they didn't come out to community.

In addition to partnership with other organisations, a number of CEOs cited strong community relationships and engagement as essential partnerships for program success. Having a unique service that engages the community in decisions about programming and delivery was seen as an important part of the effectiveness of TIS. Indeed, having good relationships with the community was seen as the most important aspect of the program by several CEOs. This local engagement was demonstrated through:

- Local quit champions telling local stories;
- Partnering with community to get the message out;
- Local program branding designed by community and easily recognized across the region;
- Local community involvement in providing feedback on national resources (e.g. iSISTAQUIT).

Monitoring and evaluation

Feedback from CEOs suggested most organisations had a positive relationship with monitoring and evaluation. This was seen as important for ensuring individuals, communities and organisation have the opportunity to provide feedback on the team's activities. CEOs described a number of M&E activities including:

- Development of in-house data collection system to capture smoking dependency not just smoking status at health checks. This was seen to provide important evidence re local smoking behaviours (most are not daily smokers);
- Using analytics to show health promotion reach (social media);
- Collecting photos and interviews to tell a positive local story;
- Surveys using SMS and online data collection.

CEOs also noted two additional key challenges which needed to be addressed by organisations working in remote areas:

- **Recruitment and retention of staff.** One CEO described how thinking about recruitment differently had worked well for them: instead of recruiting to specific work areas, the organisation had employed young community workers with a broad health focus. These health workers covered a range of health conditions (e.g. RHD) and health determinants (e.g. smoking, healthy eating). The organisation trained the workers which had the benefit of increasing both their skills and their self-esteem. Training which focused on the benefits of smoke free living also had an unexpected advantage; recognition of the impact their parents' smoking was having on their own health led to many of the workers having to raise awareness at home and negotiate smoke free living with their own family;
- **Access to resources,** particularly in language. One CEO described how the government had produced a video about COVID19 vaccinations which was then provided to organisations so they could add their own voice over in language. This was seen as very helpful and organisations wondered if NBPU TIS would be able to do something similar.

What next?

There are a number of actions that NBPU TIS can take to provide more support to organisations under each of these areas over the next 12 months. It is intended that by working more closely with organisations NBPU TIS will be able to help organisations maintain and refine Wise Practice for TIS. These actions include:

- **Supporting smoke free environments:** developing resources and providing linkage to encourage participation by harder to reach organisations (e.g. non-health ORIC registered organisations);
- **Capacity building:** working with Quitskills and others to refine available training packages and increase their appeal;
- **Social media messaging:** supporting teams by encouraging them to run any draft messages via the NBPU TIS to ensure message to community has appropriate and accurate evidence-based content;
- **Partnerships:** working with Quitline to try to overcome challenges to collaboration;
- **Monitoring and evaluation:** providing workforce development training for teams to ensure ongoing CQI;
- **Remote service delivery:** supporting teams through increased networking opportunities between organisations that service remote areas, to enable the sharing of resources and ways of working (including addressing recruitment issues).

Attachment C: Attendance

Note that names in this list are based on registrations and as they appeared through Zoom. While the names of organisations are correct, there may be some variation in the actual managers / Board members attending.

	Name	Organization
1.	Tom Calma AO	TIS National Coordinator
2.	Polly Sumner-Dodd	Aboriginal Health Council of South Australia Inc.
3.	Shane Mohor	Aboriginal Health Council of South Australia Inc.
4.	Amanda Collins-Clinch	Aboriginal Health Council of Western Australia
5.	Des Martin	Aboriginal Health Council of Western Australia
6.	Tricia Pearce	Aboriginal Health Council of Western Australia
7.	Syed Jan	Anyinginyi Health Aboriginal Corporation
8.	Debra Malthouse	Apunipima Cape York Health Council
9.	Raylene Gordon	Awabakal Medical Service
10.	Clive Holt	Bega Garberringu Health Service
11.	Payden Samuelsson	Bullinah Aboriginal Health Service
12.	Sasha Harrington	Bullinah Aboriginal Health Service
13.	Brian Hewitt	Carbal Medical Centre
14.	Donna Ah Chee	Central Australian Aboriginal Congress
15.	Jenon Batty	Danila Dilba Biluru Butji Binnilutlum Health Service
16.	Naomi Ingram	Galambila Aboriginal Health Service
17.	Stacey O'Hara	Griffith Aboriginal Medical Service
18.	Megan Green	Katherine West Health Board Aboriginal Corporation
19.	Jill Coole	Kimberley Aboriginal Medical Services Ltd.
20.	Sarah Stewart	Lakes Entrance Aboriginal Health Association
21.	Cathy Dyer	Maari Ma Health Aboriginal Corporation
22.	Holly randall	Mawarnkarra Health Service Aboriginal Corporation
23.	Gemma Lyons	Miwatj Health Aboriginal Corporation
24.	Darren Hammond	National Centre of Indigenous Excellence Ltd.
25.	Brian Doolan	Nganampa Health Council
26.	Paula Wootton	North Coast Aboriginal Corporation for Community Health
27.	Sharelle Eggmolesse	North Coast Aboriginal Corporation for Community Health
28.	Eva Pratt	Nunkuwarrin Yunti of South Australia Inc.
29.	Sarah Killick	Pangula Mannamurna Aboriginal Corporation
30.	Nicholas Haney	Puntuturnu Aboriginal Medical Service
31.	robby Chibawe	Puntuturnu Aboriginal Medical Service
32.	Nathanael Curtis	South Coast Medical Service Aboriginal Corporation
33.	Bill Palmer	Sunrise Health Service
34.	Paula Arnol	Torres Health Indigenous Corporation
35.	Susan Maco Forrester	Victorian Aboriginal Community Controlled Health Organisation Inc.

Name	Organization
36. Lionel Austin	Victorian Aboriginal Health Service
37. Colleen Inoue	West Australian Country Health Service
38. Darren Ah See	West Australian Country Health Service
39. Peter Gazey	Wurli Wurlinjang Aboriginal Corporation
40. Anita Dwyer	Department of Health
41. Marlene Duus	Department of Health
42. Matilda Jureidini	Department of Health
43. Raglan Maddox	Australian National University
44. Lena Etuk	CIRCA
45. David Thomas	Menzies School of Health Research
46. Damien House	NBPU TIS
47. Eileen Van Iersel	NBPU TIS
48. Kelly Franklin	NBPU TIS
49. Maxine Turner	NBPU TIS
50. Penney Upton	NBPU TIS
51. Raquel Kerdel	NBPU TIS
52. Rod Reeve	NBPU TIS
53. Scott McLennan	NBPU TIS
54. Ashleigh Parnell	NBPU TIS (HealthInfoNet)