



Government of Western Australia
North Metropolitan Health Service
Mental Health, Public Health and Dental Services

OFFICIAL

Update classification category – see [Information Classification Policy \(MP 00146/20\)](#)

Working Together: For Better Aboriginal Health Outcomes

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Acknowledgement of Country

We acknowledge the Noongar people as the traditional owners and custodians of the land on which we work, and pay respect to their elders both past and present.

North Metropolitan Health Service recognises, respects and values Aboriginal cultures as we walk a new path together.



Who are Boorloo Public Health Unit?

Notifiable diseases

Syphilis response team

Aboriginal Health Team

Immunisation Team

Epidemiology team



- Notifiable diseases
- Cold chain breaches
- Immunisation queries
- Rabies prophylaxis



- Free education (immunisation & disease control)



- Case management & support



- Support for childhood vaccination
- Home vaccination



- Catch-up plans
- Follow-up of overdue children



Aboriginal Health Team

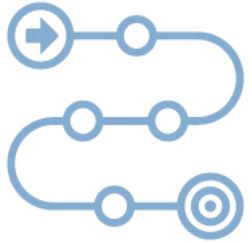


Disease Control Team

- Follow-up on notifiable communicable diseases
- Assist PHN with case and contact management
- Link cases/contact for treatment and/or testing



Steps we take:



Background

- Family connections
- Children
- eCourts
- Previous notifications
- Data systems
- Social Media



Contact

- Personal phone
- NOK
- Letters
- AMS/GPs
- Any known community or clinical providers



Outreach

- Home visits
- Court appearance
- Street outreach
- Parks/known locations
- Outpatient appointments



Into clinical care

- Book appointment
- Taxi bookings
- Transport
- Take them to pathology

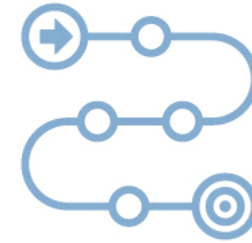


Case Study

Pregnant female 'Betty', 30yrs

First pregnancy testing at 25wks

Positive for syphilis and hepatitis C



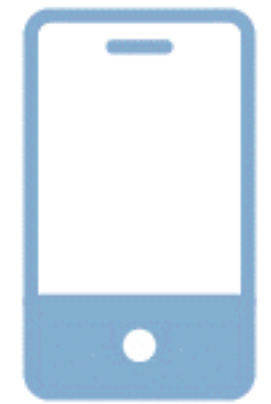
Background:

- Aboriginal
- “Southern Corridor”
- Minimal antenatal care
- 2x children



Case Study

- Primary care provider and hospital maternity unit attempted to contact Betty: unsuccessful
- Communication with multiple agencies to coordinate plan to reach Betty
- Initial numerous attempts unsuccessful
- Contact then successful to let Betty know about her diagnosis but Betty did not attend for treatment
- Social context: overwhelmed, child upcoming birthday, needing a babysitter, outstanding court issues



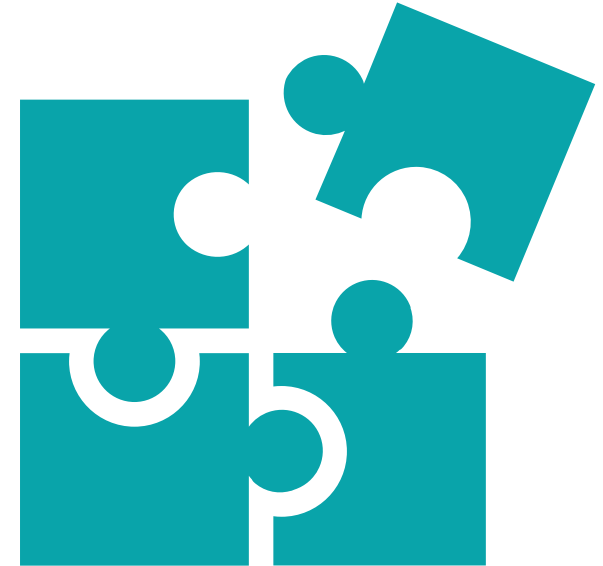
Case Study

- As time passed, clinicians became more urgent about treating Betty
 - AHT played crucial role in using social context to inform decision-making and support plans
 - Betty eventually able to be treated
 - AHT assisted with transport and creche
- Baby birthed at term, nil signs of congenital syphilis



Teamwork Approach

- Relationship building and collaboration;
- Aboriginal Health Council WA
- Aboriginal Community Hubs
- Aboriginal Medical Services
- Aboriginal Hospital Liaison Programs
- Homeless Health Care
- Street Doctor
- Child Adolescent Health Service
- HSP's
- Day Centre's – Tranby, RUAH, Passages
- Department of Justice
- Sexual Health Clinics
- Department of Communities
- Non-government organisations



Attending community events

- Importance of attending community events formal and informal
- NAIDOC Week
- Reconciliation Week
- Health expo's (Baby, Men's, Women's, Prisons)



Thank you and Acknowledgement

- Boorloo Public Health Unit
- Syphilis In Pregnancy, case review meeting members.
- Syphilis Response Team
- Aboriginal Medical Services

