

# Submission to Productivity Commission

## *Indigenous Evaluation Strategy*

August, 2019

## Introduction

The Queensland Nurses and Midwives' Union (QNMU) thanks the Productivity Commission (the Commission) for the opportunity to comment on the *Indigenous Evaluation Strategy* issues paper (the issues paper).

Nursing and midwifery is the largest occupational group in Queensland Health and one of the largest across the Queensland government. The QNMU is the principal health union in Queensland covering all classifications of workers that make up the nursing workforce including registered nurses (RN), registered midwives (RM), nurse practitioners (NP), enrolled nurses (EN) and assistants in nursing (AIN) who are employed in the public, private and not-for-profit health sectors including aged care.

Our more than 60,000 members work across a variety of settings from single person operations to large health and non-health institutions, and in a full range of classifications from entry level trainees to senior management. The vast majority of nurses and midwives in Queensland are members of the QNMU.

The QNMU recognises the importance of developing a whole-of-government approach to an evaluation strategy for policies and programs affecting Aboriginal and Torres Strait Islander people. Evaluation provides evidence of what has been done and an assessment of whether the program or policy was successful, if objectives were met and the impact of the policy or program. The logical step is to include evaluation in the design of all programs and policies that affect Aboriginal and Torres Strait Islander people.

Our submission will provide general comments regarding the Indigenous Evaluation Strategy.

## General comment

The QNMU supports the overriding objective of this project to achieve positive outcomes for Aboriginal and Torres Strait Islander peoples. A framework that will collect and analyse data and information to provide evidence of what is and is not working in policies and programs is imperative not only for the current programs but also for future initiatives. This framework should extend to all government policy initiatives. A good example is in public health where the nurse-to-patient ratios was implemented after research, evidence and evaluation showed that the number of nurses on a shift played an important role in patient safety and quality of care. Policy changed to align with the data and evidence.

We acknowledge that for some an Indigenous Evaluation Strategy may be seen as sidestepping the social welfare issues facing Aboriginal and Torres Strait Islander people. Certainly, the QNMU's support for an evaluation strategy and subsequent administrative processes is not at the expense of the health and welfare of Aboriginal and Torres Strait Islander people.

We ask that a system of accountability be included in the framework used for the evaluation of policies and programs for Aboriginal and Torres Strait Islander people. A scheme to track performance and underperformance and mismanagement should be built in. There must be clarity about who is responsible, consequences for good and poor performance, transparency and capture of information (Institute for Government, 2018).

We see the development of an evaluation strategy for Aboriginal and Torres Strait Islander people as an opportunity to embed transparency into programs and policies. This will better inform the beneficiaries of the policy and ensure the programs and policies are working and achieving what they set out to do. Targeted transparency and the disclosure of standardised information about each program and policy is important to the success of this strategy.

We also ask the Commission to consider that as a part of building evaluation into policy and program design, this evaluation must include racism. Racism can be defined as:

... the behaviours, practices, beliefs and prejudices that underlie avoidable and unfair inequalities across groups in society based on race, ethnicity, culture or religion. ... Racism can occur at three conceptual levels - internalised, interpersonal and institutional ... (Marrie, 2017, p.23).

We believe that identifying racism in policy implementation and service delivery and a protocol to report, assess and measure for racism, will make racism real and tangible. Importantly, it will go some way in preventing racism and responding safely when it occurs.

We also unreservedly support Aboriginal and Torres Strait Islander peoples leading any evaluation strategy and these positions being selected by First Nations people. If required, leadership development and capacity building must be provided to develop the skills and capabilities of Aboriginal and Torres Strait Islander people. Working in partnership with Aboriginal and Torres Strait Islander people is crucial in achieving this strategy.

## References

- Bourke, C., Marrie, H. & Marrie, A. (2018). Transforming institutional racism at an Australian hospital. *Australia Health Review*.
- Institute for Government. (2018). *Accountability in modern government. Recommendations for change*. Retrieved from [https://www.instituteforgovernment.org.uk/sites/default/files/publications/Accountability\\_modern\\_government\\_WEB.pdf](https://www.instituteforgovernment.org.uk/sites/default/files/publications/Accountability_modern_government_WEB.pdf)
- Marrie, A. (2017). *Addressing institutional barriers to health equity for Aboriginal and Torres Strait Islander people in Queensland's public hospital and health services*. Report to Commissioner Kevin Cocks AM. Anti-Discrimination Commission Queensland