

Core Operational Funding Project Performance Report 1 July 2023 – 30 June 2024

Submitted to: IAHP-WA

Submitted: July 2024

HealthInfoNet news and developments

- ✓ Release of the annual **Overview of Aboriginal and Torres Strait Islander health status and summary version**
- ✓ **New portal of Wellbeing resources** for the Voice referendum in collaboration with NACCHO
- ✓ **New HTLV-1 portal** in collaboration with NACCHO
- ✓ Refresh of the **Cultural Safety portal**

Newsletters



2,997 newsletter subscribers
46 newsletters distributed
7 topics covered

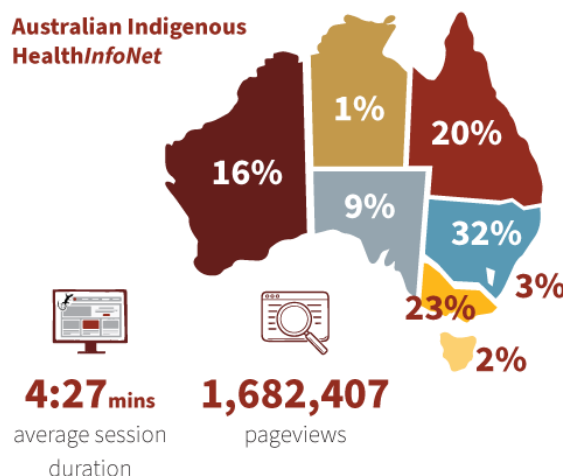
Conferences



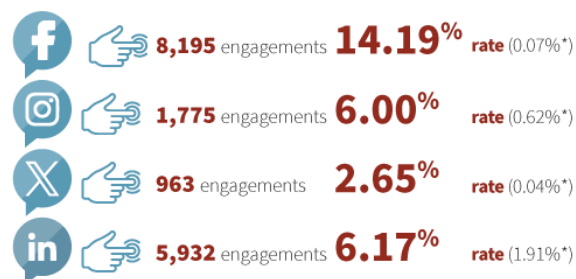
6 conferences exhibited
3 presentations

Engagement statistics

Australian Indigenous HealthInfoNet



Social media



*Industry average non-profit

Australian Indigenous HealthBulletin:

114,379 pageviews
2:53 mins average session duration

Journal of the Australian Indigenous HealthInfoNet:

2 issues published: **14,359** downloads from **103** countries by **354** institutions worldwide



the dependency of all other funded projects on the DOHAC funding

Our posts appeared in another user's feed more than

219,725 times

We received **over 16,865** engagements on all our posts

Total number of followers: **25,816**

Core funding is provided by the Australian Government Department of Health and Aged Care

Helping to close the gap by providing the evidence base to inform practice and policy in Aboriginal and Torres Strait Islander health

ECU AIH Core Operational Funding Performance Report 1 July 2023 – 30 June 2024

Instructions: This template is to be used for:

- Completion of a **Performance Report (2A and 2B)** measuring outcomes against your approved Activity Work Plan (as required in the terms of your Agreement).
- When complete, email to your IAHP-WA@dss.gov.au

1A. SERVICE PROVIDER & FUNDING INFORMATION	
Organisation Name & Location	Edith Cowan University, Mount Lawley, Western Australia
Activity ID: 4-JOPEDS2	Australian Indigenous HealthInfoNet (AIH) Core Operational Funding
Reporting period:	1 July 2023 – 30 June 2024
Contact name & Position title:	Professor Neil Drew AM FAPS FCCOMP Director Australian Indigenous HealthInfoNet Edith Cowan University 2 Bradford Street, Mt Lawley WA 6050 Ph: 08 9370 6155
Performance Report Template The streamlined template overleaf has been created from the submitted 2023 - 2024 Activity Work Plan to enable the Community Grants Hub to efficiently assess the progress made against the grant key performance indicators during the reporting period.	

1A. ACTIVITY DELIVERABLES 2023-2024 Activity Work Plan (AWP)			2A. Performance Report		
Deliverable	Measures	Timeline	Status (Select from Met, Partly -Met, Delayed, or Completed)	Progress Comments	
1. New entries of publications and resources added in the HealthInfoNet’s online bibliography and other information added about programs, organisations and workforce information (events, courses, funding and jobs).	The number of new entries for publications and resources in the HealthInfoNet’s online bibliography and the number of new entries for programs, organisations and workforce information (events, courses, funding and jobs).	1/7/2023 – 30/6/2024	Met	In the reporting period the following number of items were added to the database ¹ :	
				Publications	1,299
				Policies	142
				Health promotion resources	266
				Health practice resources	211
				Programs	254
				Organisations	55
				Courses	84
				Events	762
				Funding	143
				Jobs	2,378

¹ Note: these are total entries for all health topics across the whole website not just for the key health conditions.

2.	Ensure the highest coverage of the key health conditions (cardiovascular disease, diabetes, kidney disease, cancer, respiratory disease, sexual health and social and emotional wellbeing)	Number of new entries for publications, resources, programs, organisations and workforce information for each portal	1/7/2023 – 30/6/2024	Met	In the reporting period the following number of items were added to the database for each key health condition: <table><tr><td>Cancer</td><td>69</td></tr><tr><td>Cardiovascular Health</td><td>213</td></tr><tr><td>Diabetes</td><td>357</td></tr><tr><td>Kidney Health</td><td>258</td></tr><tr><td>Respiratory Health</td><td>88</td></tr><tr><td>Sexual Health</td><td>125</td></tr><tr><td>Social and Emotional Wellbeing</td><td>1,217</td></tr></table>	Cancer	69	Cardiovascular Health	213	Diabetes	357	Kidney Health	258	Respiratory Health	88	Sexual Health	125	Social and Emotional Wellbeing	1,217
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<p>3. Each of the key health topic's content areas will be audited on a rotational basis.</p>	<p>Content areas for the key health topics audited and reported in the performance reports.</p>	<p>1/7/2023 – 30/6/2024</p>	<p>Met</p>	<p>In the reporting period the following sections were audited for each key health condition:</p> <table border="1" data-bbox="1182 193 2141 924"> <thead> <tr> <th>Key health condition</th><th>Resources</th><th>Programs</th><th>Organisations</th><th>Workforce²</th></tr> </thead> <tbody> <tr> <td>Cardiovascular Health</td><td>101</td><td>71</td><td>6</td><td>12</td></tr> <tr> <td>Cancer</td><td>193</td><td>103</td><td>14</td><td>18</td></tr> <tr> <td>Diabetes</td><td>251</td><td>91</td><td>7</td><td>35</td></tr> <tr> <td>Kidney Health</td><td>102</td><td>83</td><td>9</td><td>8</td></tr> <tr> <td>Respiratory Health</td><td>185</td><td>91</td><td>17</td><td>17</td></tr> <tr> <td>Social and emotional wellbeing</td><td>38</td><td>709</td><td>144</td><td>178</td></tr> <tr> <td>Sexual Health</td><td>100</td><td>18</td><td>25</td><td>12</td></tr> </tbody> </table> <p>The auditing procedure can also involve tagging some of the existing health content to other health topics on the website.</p> <p>During the reporting period, an estimated 12,440 links to publications, resources, and policies, across the HealthInfoNet's websites were checked for currency and updated.</p>	Key health condition	Resources	Programs	Organisations	Workforce ²	Cardiovascular Health	101	71	6	12	Cancer	193	103	14	18	Diabetes	251	91	7	35	Kidney Health	102	83	9	8	Respiratory Health	185	91	17	17	Social and emotional wellbeing	38	709	144	178	Sexual Health	100	18	25	12
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<p>4. A state-of-the-art web resource to be publicly available for a minimum of 95% of the time.</p>	<p>The percentage of time that the HealthInfoNet website is publicly available.</p>	<p>1/7/2023 – 30/6/2024</p>	<p>Met</p>	<p>The HealthInfoNet website was freely available to users for 99.8% in the reporting period.</p>																																								

² All jobs are audited monthly for each key health topic.

5. Provide usage statistics of the web resource	Three percent increase in page views and time on page reported in performance reports.	1/7/2023 – 30/6/2024	Met	<p>During this reporting period, 1 Jul 2023 to 30 Jun 2024, there were 1,682,407 pageviews and 04:27 (minutes: seconds) average session duration recorded. The same time in the previous year, 1 Jul 2022 to 30 Jun 2023, had 1,206,091 pageviews and 04:27 (minutes: seconds) average session duration. This equates to a 39% increase in pageviews and no change in average session duration³.</p> <p>As of September 2023, Google Analytics underwent a complete transformation in the way data is collected, analysed, and reported. The previous analytics system, known as Universal Analytics, primarily focused on page views and screen views. However, the new method, Google Analytics 4 (GA4), centres around event-based tracking.</p> <p>At the Australian Indigenous Health/<i>InfoNet</i>, we have undertaken efforts to adapt to this transformation and update our reporting methods accordingly. However, this process is still a work in progress. We are currently in the process of trialling alternative data criteria for metrics that are no longer supported under GA4.</p> <p>Therefore, due to the fundamental changes, it's important to note that data collected prior to September 2023 using Universal Analytics is not directly comparable to data collected after this date using GA4.</p>
6. The 2023 <i>Overview</i> will be published and available online, and in hardcopy formats.	<p>The 2023 <i>Overview</i> will be published to a high-quality standard.</p> <p>The <i>Overview</i> will be printed and distributed to stakeholders at conferences where the Health/<i>InfoNet</i> holds an exhibition stand.</p>	31 March 2024	Met	<p>The <i>Overview of Aboriginal and Torres Strait Islander health status 2023</i> was published on 6 March 2024. A limited number of the <i>Overview</i> publication was printed, due to budget constraints, and distributed to key stakeholders by mail and at conferences, events and in stakeholder meeting kits.</p>
7. The 2023 <i>Summary</i> will be published and available online. A PowerPoint presentation, based on the <i>Overview</i> , will also be produced.	The 2023 <i>Summary</i> , and PowerPoint presentation, produced.	30 April 2024	Met	<p>The <i>Summary of Aboriginal and Torres Strait Islander health status – selected topics 2023</i> was published on 6 March 2024 along with the <i>Overview</i> and PowerPoint slides.</p>

³ This was not a requirement in past funding periods.

8. A comprehensive summary, synthesis, analysis and interpretation of data, statistics and other information compiled for inclusion in the published review with associated KEs.	Commencement of the <i>Review of blood borne viruses among Aboriginal and Torres Strait Islander people</i>	31 December 2024	Met	The <i>Review of blood borne viruses among Aboriginal and Torres Strait Islander people</i> is progressing well. The first draft is due 31 July 2024. The <i>Review</i> is expected to be published in the Journal of the Australian Indigenous HealthInfoNet by 31 December 2024. The <i>Review</i> will be included in a suite of products including a <i>Summary</i> , video, and factsheet. Formal promotion of the <i>Review</i> , and associated <i>Summary</i> , video, and factsheet, is scheduled for December 2024.
9. The Australian Indigenous HealthBulletin to be collated and made available online.	Regular collation and updating of the information on the Australian Indigenous HealthBulletin.	1/7/2023 – 30/6/2024	Met	<p>For the entire reporting time of the HealthBulletin website, 1 Jul 2023 to 30 Jun 2024, there has been 114,379 pageviews and 02:53 (minutes: seconds) average session duration recorded.</p> <p>In 2023 the HealthBulletin website undertook a significant redesign and because of this a comparison for the previous period cannot be made.</p> <p>During the reporting period 1,766 publications, policies and resources were added to the HealthBulletin website.</p>

10. Post content on a range of social media platforms; Facebook, Twitter and LinkedIn	Number of posts, followers, impressions, engagements and click-throughs	1/7/2023 – 30/6/2024	Met	<p>The following table provides information on social media activities in the reporting period:</p> <table><tr><th></th><th>Facebook</th><th>Instagram</th><th>Twitter</th><th>LinkedIn</th><th>Total</th></tr><tr><td>Posts</td><td>188</td><td>189</td><td>182</td><td>189</td><td>748</td></tr><tr><td>Impressions</td><td>57,759</td><td>29,587</td><td>36,277</td><td>96,102</td><td>219,725</td></tr><tr><td>Engagement</td><td>8,195</td><td>1,775</td><td>963</td><td>5,932</td><td>16,865</td></tr><tr><td>Engagement rate</td><td>14.19%</td><td>6.00%</td><td>2.65%</td><td>6.17%</td><td>7.25%</td></tr><tr><td>Industry average engagement rate (non-profit organisations) ⁴</td><td>0.07%</td><td>0.62%</td><td>0.044%</td><td>1.91%</td><td>0.66%⁵</td></tr><tr><td>No. of followers</td><td>5,035</td><td>1,535</td><td>7,818</td><td>11,428</td><td>25,816</td></tr></table> <p>In the last 12 months, the HealthInfoNet has received more than 16,500 engagements on all our posts⁶ (clicks, likes/reacts, shares, comments etc.) and our posts appeared in another user’s feed more than 219,000 times.</p> <p>The social media strategy is performing well with engagement rates much higher than the industry average. There has also been an excellent growth in Instagram and LinkedIn followers.</p>		Facebook	Instagram	Twitter	LinkedIn	Total	Posts	188	189	182	189	748	Impressions	57,759	29,587	36,277	96,102	219,725	Engagement	8,195	1,775	963	5,932	16,865	Engagement rate	14.19%	6.00%	2.65%	6.17%	7.25%	Industry average engagement rate (non-profit organisations) ⁴	0.07%	0.62%	0.044%	1.91%	0.66% ⁵	No. of followers	5,035	1,535	7,818	11,428	25,816
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⁴ Source: Sprout Social 2023.

⁵ This figure is the average of industry engagement rates across all platforms.

⁶ This includes other posts for other projects funded by external sources.

11. Regular newsletter issues produced throughout the year.	The number of newsletters produced throughout the year for the key health conditions.	1/7/2023 – 30/6/2024	Met	<div>In the reporting period the following numbers of newsletters were distributed:</div> <table><thead><tr><th></th><th>Number of newsletters</th><th>Number of subscribers</th></tr></thead><tbody><tr><td>Cancer</td><td>10</td><td>460</td></tr><tr><td>Diabetes</td><td>8</td><td>495</td></tr><tr><td>Heart Health</td><td>5</td><td>450</td></tr><tr><td>Kidney Health</td><td>4</td><td>393</td></tr><tr><td>Respiratory Health</td><td>4</td><td>209</td></tr><tr><td>Sexual Health</td><td>5</td><td>189</td></tr><tr><td>Social and emotional wellbeing</td><td>10</td><td>801</td></tr><tr><td>Total</td><td>46</td><td>2,997</td></tr></tbody></table> <div>The has been an increase of 160 subscribers in the reporting period.</div>		Number of newsletters	Number of subscribers	Cancer	10	460	Diabetes	8	495	Heart Health	5	450	Kidney Health	4	393	Respiratory Health	4	209	Sexual Health	5	189	Social and emotional wellbeing	10	801	Total	46	2,997
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12. Evidence of sustained engagement with peak bodies, professional associations and partner organisations in the sector.	There will be 3-4 meetings/tele meetings nationally in the year.	1/7/2023 – 30/6/2024	Met	Face-to face meetings, by the Director and Development & Marketing Manager, were held in Brisbane, Canberra, Perth, Sydney, Adelaide and Melbourne.																											
13. Strong support, cultural governance and guidance from the HealthInfoNet’s Advisory Board.	One online meeting with the Advisory Board.	1/7/2023 – 30/6/2024	Met	The Director had regular phone and email contact with members.																											

<p>14. Strong relationships with the HealthInfoNet's honorary Consultants including renewal and succession in the list of honorary Consultants.</p>	<p>At least four email communications with each Consultant in the year.</p>	<p>1/7/2023 – 30/6/2024</p>	<p>Met</p>	<p>In the reporting period electronic communication to Consultants included specific emails on the:</p> <ul style="list-style-type: none"> • release of the annual <i>Overview of Aboriginal and Torres Strait Islander health status</i> and summary version • two Journal issues • new portal of Wellbeing resources for the Voice referendum in collaboration with NACCHO • new HTVL-1 portal in collaboration with NACCHO • refresh of the cultural safety portal.
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<p>15. Strategic advice from key stakeholders in the Aboriginal and Torres Strait Islander health sector.</p>	<p>Two Roundtables held in the year.</p>	<p>1/7/2023 – 30/6/2024</p>	<p>Met</p>	<p>There were two Health/InfoNet Roundtables held in the reporting period, one in Brisbane in October 2023 and the other in Canberra in March 2024. These were well attended with 45 – 50 attendees at each event representing a cross section of peak bodies in the sector. In addition to presentations, there were networking opportunities for attendees.</p> <p>At both Roundtables, Health/InfoNet Director, Neil Drew, updated attendees on the work of the Health/InfoNet.</p> <p>Guest speakers at the Canberra event were:</p> <ul style="list-style-type: none"> • Winnunga Nimmityjah Aboriginal Health and Community Services - CEO, Julie Tongs (is an Aboriginal community controlled primary health care service operated by the Aboriginal and Torres Strait Islander community of the ACT). • The Healing Foundation – CEO, Shannan Dodson (a national Aboriginal and Torres Strait Islander organisation that provides a platform to amplify the voices and lived experience of Stolen Generations survivors and their families). • National Rural Health Alliance (NRHA) - CEO, Susi Tegen, (comprises of 50 national organisations committed to improving the health and wellbeing of the 7 million people in rural and remote Australia). • Rural Doctors Australia Association (RDAA) – CEO Peta Rutherford (the only member body that backs rural doctors 100% and supports them to engage with Governments at all levels, developing policy positions on issues important to rural doctors). <p>Guest speakers at the Brisbane event were:</p> <ol style="list-style-type: none"> 1. Queensland Network of Alcohol and Other Drug Agencies (QNADA) - CEO, Rebecca Lang (the peak organisation for the non-government alcohol and other drug treatment and harm reduction sector in Queensland). 2. The e-Mental Health in Practice Project (eMHPrac) – Director, Heidi Sturk (The e-Mental Health in Practice Project aims to raise health practitioner awareness and knowledge of Digital Mental Health and training for those working with Aboriginal and Torres Strait Islander people. WellMob is a joint project).
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				<p>3. Australian College of Rural & Remote Medicine (ACRRM) – Senior Policy Officer, Mary Jane Streeton (the only College in Australia dedicated to rural and remote medicine and supporting junior doctors and medical students).</p> <p>4. Lung Foundation Australia – Senior Manager Priority Populations, Elizabeth Early (working to ensure lung health is a priority for all, from promoting lung health and early diagnosis, advocating for policy change and research investment).</p>
16. Engagement with the workforce and other stakeholders, at targeted conferences, or via presentations of the HealthInfoNet website to key stakeholder groups.	Five conference exhibitions, presentations and/or inserts held in the year.	1/7/2023 – 30/6/2024	Met	<p>In the reporting period, the AIH exhibited at six conferences and gave three presentations:</p> <ul style="list-style-type: none"> • WA Rural and Remote conference Perth – presented • IAHA conference Sunshine coast– exhibited • Rural Health West Perth – exhibited • NACCHO conference – exhibited and presented • AHMRC conference Sydney – exhibited • World Indigenous Cancer conference Melbourne – exhibited • QAAMS conference Adelaide – exhibited and presented. <p>Conferences continue to provide the HealthInfoNet with an excellent opportunity to update a cross section of existing users and prospective users face to face on what is new and relevant across the HealthInfoNet sites. The HealthInfoNet's Overview and health topic reviews are always the most popular resources. Information on chronic conditions, cultural ways, SEWB, and palliative care are also sought by delegates. There has been a dedicated push to encourage delegates to sign up for the topic specific newsletters so that they are kept up to date. A basket of items has been raffled at each of the above conferences with an average of 40 people signing up at each conference.</p>

17. Ongoing regular electronic communication with key stakeholders.	Four electronic communications with stakeholders throughout the year	1/7/2023 – 30/6/2024	Met	<p>In the reporting period there were email blasts to approximately 3,100 corporate news subscribers, Consultants, Advisory Board members, partners, and funders regarding the:</p> <ul style="list-style-type: none"> • release of the annual <i>Overview of Aboriginal and Torres Strait Islander health status</i> and summary version • two Journal issues • new portal of Wellbeing resources for the Voice referendum in collaboration with NACCHO • new HTVL-1 portal in collaboration with NACCHO • refresh of the cultural safety portal.
18. Information compiled for high level briefing, by the HealthInfoNet Director, to provide updates on current and future developments at the HealthInfoNet.	Publication of the Director's Communique.	1/7/2022 – 30/6/2023	Met	<p>In the reporting period the July, December and April issues of the HealthInfoNet Director's Communique were published.</p>

1B. RISK MANAGEMENT 2023-2024 Activity Work Plan (AWP)		2B. Performance Report
Challenges - What difficulties may be experienced by your organisation in delivering the program?	Mitigation strategies – how will your organisation try to address these difficulties?	Progress - to be filled in by organisation only when undertaking a Report against your Deliverables
<p>There are five main risks to the HealthInfoNet's operations:</p> <ul style="list-style-type: none"> • cultural appropriateness • quality control • financial • staffing • information technology 	<ul style="list-style-type: none"> • Cultural appropriateness: mitigated through strong governance; oversight by the Advisory Board and strong relationships and partnerships with key stakeholders and peak bodies along with the HealthInfoNet's experience of over 26 years in developing and delivering websites and knowledge exchange material • Quality control: mitigated through embedded quality control mechanisms including peer-review of substantial documents • Financial: mitigated through ECU's comprehensive governance structure • Staffing: mitigated through a strong orientation and training regime along with a documented procedure manual 	<ul style="list-style-type: none"> • Cultural appropriateness The HealthInfoNet continues to have strong cultural governance structures and processes that are working effectively. Since the last report there has been ongoing negotiation between the HealthInfoNet Director Professor Neil Drew, Professor Dan McAullay, Head of Kurongkurl Katitjin at ECU, Professor Braden Hill, Deputy Vice Chancellor Equity and Indigenous at ECU and HealthInfoNet Advisory Board members. In the reporting period it was resolved that the HealthInfoNet Advisory Board will be integrated into the ECU institutional cultural governance structures with special responsibility for the HealthInfoNet. This will provide a more formal cultural authority structure and ECU will provide resources to support the Advisory Board. The integration process is underway and will be completed in the next reporting period. • Quality control All quality control mechanisms, such as peer-review of knowledge exchange products and publications, were adhered to throughout the reporting period. All new staff were inducted and trained in HealthInfoNet policies, procedures, and practices. • Financial Regular due diligence oversight meetings were held between ECU Finance and the HealthInfoNet's Director and Business Manager. • Staffing All new staff received induction, orientation and training as required by ECU and the HealthInfoNet policies and procedures. All new staff were recruited in accordance with ECU HR policy and procedures.

1B. RISK MANAGEMENT 2023-2024 Activity Work Plan (AWP)		2B. Performance Report
Challenges - What difficulties may be experienced by your organisation in delivering the program?	Mitigation strategies – how will your organisation try to address these difficulties?	Progress - to be filled in by organisation only when undertaking a Report against your Deliverables
	<ul style="list-style-type: none">Information technology: mitigated through operating within a protective ECU IT environment.	<ul style="list-style-type: none">Information technology <p>The Health/InfoNet IT ecosystem continues to be managed within the ECU IT environment, with oversight by the Health/InfoNet's IT Manager. All performance indicators relating to IT performance were met and exceeded. We are part of an ECU internal audit and review of IT security practices which will ensure we remain best practice.</p> <p>The Health/InfoNet continues to liaise with ECU IT experts to update our security software and protocols.</p> <p>The Health/InfoNet has established an Artificial Intelligence (AI) working group to assess the impact of AI on Health/InfoNet operations. In addition, the Health/InfoNet IT Manager is a member for the ECU AI Working Group. The Director has been liaising with experts in the Aboriginal and Torres Strait Islander health sector to ensure that the cultural, ethical, moral, and legal obligations for best practice use of AI in Aboriginal and Torres Strait Islander health are developed, adopted and adhered to.</p>

Stakeholder Engagement

(provide a short narrative update on stakeholder engagement over the period)

In the reporting period there was continued promotion and engagement with stakeholders. Stakeholders communicated with included Advisory Board members, partners, funders, Consultants, NACCHO and affiliates, government agencies, NGO's, peak bodies, and professional associations. There were face-to-face and online meetings with organisations in the sector and email blasts.

Face-to face meetings, by the Director and Development & Marketing Manager, were held in Brisbane, Canberra, Perth, Sydney, Adelaide, and Melbourne.

The HealthInfoNet exhibited at six conferences and presented at three of these.

Hard copies of the *Overview of Aboriginal and Torres Strait Islander health status 2023* was posted to Federal Ministers of Health, funders, NACCHO and state ACCHO's.

The major resources and information promoted electronically, to approximately 3,100 stakeholders, in the period included the:

- *Overview of Aboriginal and Torres Strait Islander health status 2023, Summary of Aboriginal and Torres Strait Islander health status – selected topics 2023* and associated PowerPoint presentations.
- July, December, and April issues of the HealthInfoNet's Directors Communique.
- Two issues of the Journal of the Australian Indigenous HealthInfoNet.
- Information of relevance to Aboriginal and Torres Strait Islander health in the Australian Government's budget in May.
- New portal of Wellbeing resources for the Voice referendum in collaboration with NACCHO.
- New HTVL-1 portal in collaboration with NACCHO.
- Refresh of the cultural safety portal.

For CGH Administration

Funding Agreement Manager Record observations and recommendations (if any)

THIS PAGE FOR ACCEPTANCE OF ACTIVITY WORK PLAN

Activity Work Plan accepted – Community Grants Hub	Signature: Date: Name:
Team Leader Action (EL/Team Leader to finalise)	Signature: Date: Name: