

Aboriginal, Arabic, Vietnamese Navigators

An equity-led approach to cancer care

Aboriginal people experience challenges in accessing and engaging with cancer services and treatment, including cultural, social and practical barriers, highlighting the critical need for delivery of culturally safe, supportive care.



CALD cancer patients experience greater mortality and morbidity, reporting high levels of fear and stigma regarding cancer and treatment resulting in lower engagement with medical teams, and participation in clinical trials. With 40% of residents born overseas and half speaking a language other than English in the home, SWSLHD is an ideal context in which to deliver culturally competent cancer care.



Aboriginal and Multicultural Navigators

Using Patient reported measures, and an aboriginal-specific wellbeing survey, we aim to improve the experience for patients by providing culturally relevant support services.

The cultural navigator program will focus on Aboriginal & Torres Strait Islander people, as well as Arabic and Vietnamese speaking patients who have been recently diagnosed with cancer in **SWSLHD facilities**.

The Navigator provides one-to-one, in-language, personalised support that fits the patient needs. Support is provided by 'Navigators' who have regular contact for up to the first 4 months. Designed to assist patients to develop a better understanding of their health and confidence in navigating the healthcare system. Navigators also support healthcare providers to understand patient needs and provide culturally sensitive care.

These externally funded roles will implement PRMs to flag issues affecting patients, and curate aboriginal and multicultural resources and support services available in our community, to link patients in. Working closely with the care coordination and Allied Health teams, we will be inviting referrals to the Aboriginal, Arabic and Vietnamese Navigators, with a risk stratification for triage purposes, using the Mosaik Care Coordinator Referral.

Support offered by the Navigators

What the role will do

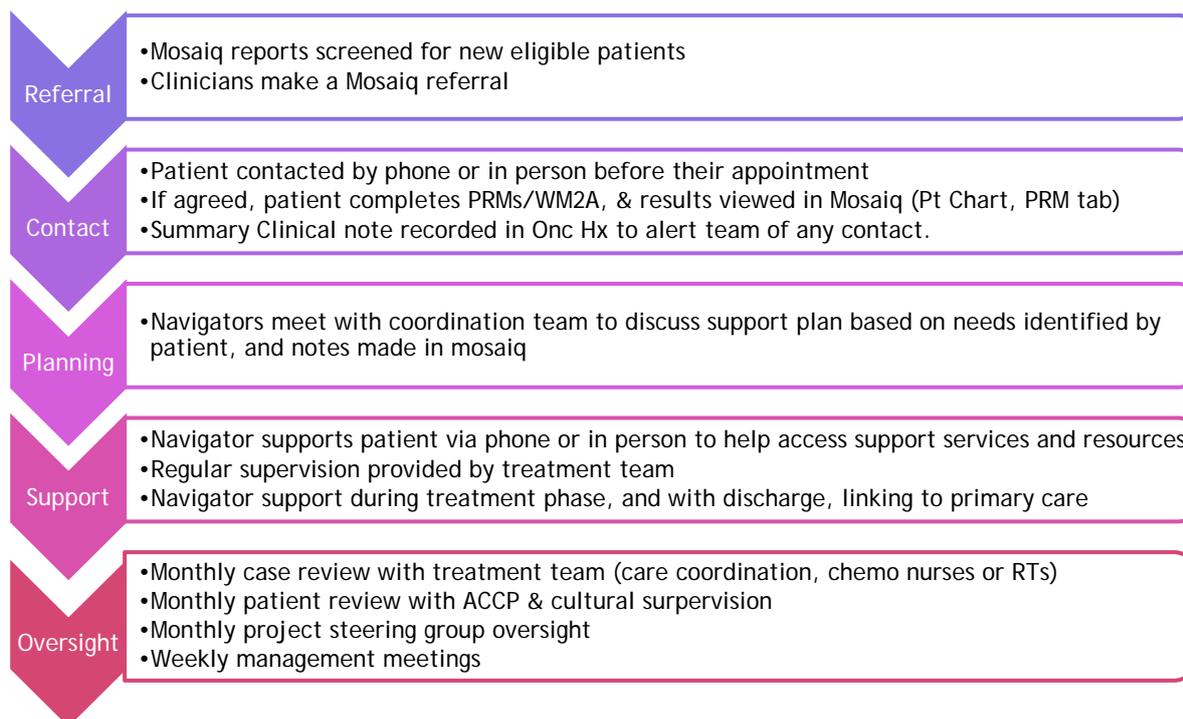
- Deliver the cultural PRMs assessment (WM2A, ESAS/DT) and make referrals as appropriate for the patients' cultural, psychosocial and clinical needs
- Assist patients to understand information provided by their treating team, (eg screening, treatment choices, quit smoking support, outcomes and the healthcare system, clinical trials.)
- Identify cultural-specific self-management resources and support patients & carers to use health & community services (eg linking with ACCP, ALO, MCHU)
- Encourage patients to communicate preferences & priorities for treatment to their treatment team
- Listen to patient concerns and provide emotional support for at risk patients.

What the role does NOT do

- Is NOT a Clinical Care Coordinator, Aboriginal Liaison Officer, or ACCP provider
- Is NOT to attend as an interpreter
- Does NOT provide clinical information or advice
- Is NOT an escort to take patients to medical appointments
- Does NOT attend MDT or other meetings as an advocate for individual patients
- NOT professional counselling/therapy service
- Does NOT provide 24/7 or emergency support
- Does NOT provide financial assistance to patients

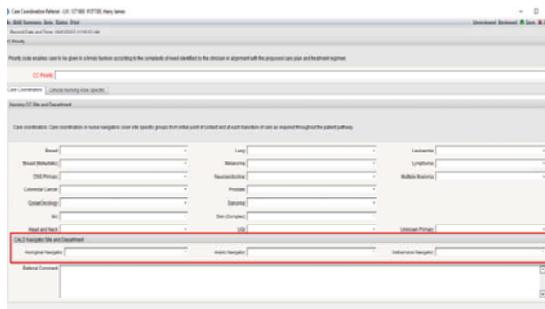


The model of care



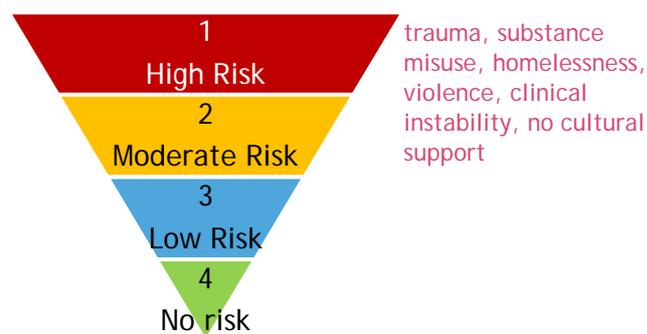
How to refer

1. Open patient chart in Mosaiq
2. Click on Assessments in the toolbar
3. Select the Care Coordination Referral from the view dropdown & click Add
4. Select relevant Navigator, patient Risk, make a comment



Risk Stratification

Indicate risk level for Cultural, psychosocial & clinical indicators, to assist with prioritisation:



trauma, substance misuse, homelessness, violence, clinical instability, no cultural support

Well connected with good family & community support in place

Contact details:

SWSLHD-CancerAboriginalHealthOfficer@health.nsw.gov.au

SWSLHD-CancerCALDOfficer@health.nsw.gov.au