Aged Care Research & Industry Innovation Australia

ARIIA First Nations Aged Care Workforce Capability Building Program

July 2026

Acknowledgements

Acknowledgement of Country
We acknowledge and pay our respects to the traditional custodians whose ancestral lands we work and live on. We pay respect to Elders past and present. We respect their spiritual beliefs and connections to land which are of continuing importance to the people of today. We further acknowledge the contributions and important role that Aboriginal and Torres Strait Islander people continue to play within our shared community.

Aboriginal and Torres Strait Islander people should be aware that this report and the ARIIA First Nations Hub website may contain images, voices and names of deceased persons.

Acknowledgement of participants - Ngaityalya
ARIIA would like to sincerely thank the members of the ARIIA First Nations Governance Committee who provided strong leadership and cultural oversight to this program of work – we look forward to continuing our work alongside you! Thank you to the many people and organisations who have generously given us their time to support collation of the resources and case studies for the Hub. Thank you to participants, hosts and sponsors of the Knowledge Exchange pilot for your time and trust in us. Thank you to the participants of the Roundtable event who travelled from across the country to yarn with us. Ngaityalya!

ARIIA authors and team
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ARIIA would like to acknowledge the Aboriginal artwork titled “Journey of Care and Connection” that was designed by Amy Kilby. Amy’s explanation of the meaning behind the artwork and the elements used in it is provided at the end of this document.

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First Nations Hub: https://www.ariia.org.au/first-nations-hub

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Exec Summary

The ARIIA First Nations Aged Care Workforce Capability Building Program was developed in response to persistent structural, systemic and workforce challenges affecting the delivery of culturally safe, evidence-informed aged care for Aboriginal and Torres Strait Islander older people. These challenges create a strong case for targeted capability building, knowledge sharing and implementation support led by, and accountable to, First Nations expertise, leadership and cultural authority.

The program responded directly to priorities identified through the 2024 ARIIA First Nations Workforce Capability Roundtable and was delivered nationally with guidance from a First Nations Governance Group. It brought together three mutually reinforcing activities: the First Nations Hub, a culturally informed knowledge platform; a Workforce Capability-Strengthening Knowledge Exchange Pilot to support experiential peer learning; and knowledge sharing and networking activities to strengthen relationships and inform future sector priorities.

The report demonstrates that the program delivered practical and strategic value by making culturally safe knowledge more visible, supporting implementation-focused learning, and strengthening connection across the First Nations aged care sector. The Hub has shown promising early engagement and sector reach, while the Knowledge Exchange Pilot generated strong qualitative evidence of increased participant knowledge, confidence and readiness to adapt best-practice approaches within local service contexts. Feedback from participants, hosts and stakeholders reinforced the value of relationship-based learning, mentoring and ongoing peer support.

Overall, the report positions ARIIA as an ally, knowledge partner and implementation enabler whose strongest contribution is to amplify First Nations-led practice, build and share evidence of what works, and support adaptation of culturally safe models across diverse community contexts. The 2026 Roundtable reinforced priorities for culturally safe, community-led care, sustainable workforce development, structural reform, innovation, collaboration and knowledge sharing. Building on the success of this philanthropically funded program, ARIIA will seek further funding, maintain and expand the First Nations Hub, add new resources and case studies, and continue to support sector capability through evidence translation, partnerships and culturally safe implementation support.

Context

The First Nations aged care sector is shaped by significant structural and systemic challenges that limit the consistent delivery of culturally safe, evidence-based care.

The mainstream aged care system has historically not been designed for First Nations people, resulting in persistent inequities in access, experience, and outcomes. The Aged Care Royal Commission and subsequent policy frameworks acknowledge that the system has “not adequately supported older Aboriginal and Torres Strait Islander people”, with ongoing gaps in culturally safe and responsive care. [1]

These systemic issues are reinforced by findings from the Interim First Nations Aged Care Commissioner, which indicate that the current system is often culturally unsafe, difficult to navigate, and poorly aligned to community needs, creating additional barriers to access and engagement. [2] Structural constraints—including inflexible funding models, fragmented service systems, and limited First Nations-specific data—further restrict organisations’ ability to design and deliver tailored, community-led services. [3]

Workforce capability challenges compound these structural limitations. Evidence identifies shortages of Aboriginal and Torres Strait Islander staff, alongside broader gaps in cultural competence, training, and integration of cultural knowledge into care delivery. These issues are particularly pronounced in rural and remote contexts, where workforce supply, service access, and local adaptation are constrained. [4-5]. Together, these structural and capability constraints limit the sector’s ability to provide care that is culturally safe, community-informed, and grounded in evidence.

The sector also faces fragmentation and isolation, with stakeholders frequently working without opportunities to connect, share knowledge, or build relationships across organisations. This is compounded by workforce pressures, which limit the capacity to engage in learning and collaboration activities.

Together, these factors establish a clear case for change to:

- strengthen workforce capability in culturally informed, evidence-based practice.
- capture knowledge systematically and share best-practice.
- enable translation of knowledge into local implementation.
- build connection, collaboration and peer learning across the sector.

2024 ARIIA First Nations Workforce Capability Roundtable – Priority setting for ARIIA

The ARIIIA First Nations Workforce Capability Roundtable held on 16 October 2024 used a participatory co-design approach that brought together First Nations stakeholders, community representatives, and sector experts to identify workforce needs and priorities. This ensured discussions were grounded in cultural authority and lived experience:

- To understand the current workforce context,
- To identify care quality and workforce needs, and
- To define future workforce priorities and ARIIA's role.

Image: Participants of roundtable 2024, rights approved and reserved ARIIA ©.

The 2024 Roundtable produced a clear and consistent set of insights and priorities across workforce, care models, and system reform. It highlighted that the current First Nations aged care workforce operates within a context shaped by historical mistrust, inflexible regulatory systems, alongside a mismatch between mainstream service models and community expectations. Stakeholders emphasised that care is primarily delivered through family and kin-based networks, where cultural knowledge, lived experience, and

relationships are often more critical than formal qualifications. However, this work is frequently undervalued, with carers carrying significant cultural and emotional load alongside workforce shortages, fragmented training pathways, and barriers related to geography, funding, and access to culturally appropriate training or services.

A consistent theme was that optimal aged care for First Nations communities requires culturally safe, flexible, holistic models that extend beyond clinical care to incorporate social, emotional, and community wellbeing. The importance of services being led by Elders, communities, and Aboriginal Community Controlled Organisations (ACCOs) was highlighted, with care delivered on Country wherever possible. There was strong support for recognising and resourcing family carers. Stakeholders also supported integrating hybrid and wraparound service models, while aligning workforce development with culturally grounded frameworks such as NATSIFAC. At the same time, gaps were identified in areas such as rural and remote service provision, dementia and palliative care, elder abuse responses, and workforce pathways that adequately recognise prior learning and lived experience.

For ARIIA, stakeholders advised that the key opportunities centred on a facilitative and amplifying role rather than direct service design or duplication of existing First Nations-led work. The Roundtable identified a clear role for ARIIA in strengthening the evidence base for what works in culturally safe aged care, supporting knowledge sharing and collaboration across the sector, and raising awareness of more flexible, evidence-based funding models that recognise kin-based care and ACCO leadership.

Evidence from the First Nations Aged Care Workforce Needs and Opportunities Roundtable identified that while there are locally developed, effective initiatives, these are often grassroots and not systematically shared or scaled, resulting in limited dissemination and adoption across the sector. At the same time, organisations providing care to First Nations older people report a need for greater support to identify, adapt, and implement culturally appropriate best-practice models of care, particularly those that are transferable across diverse community contexts. This is where ARIIA could provide support.

Practical opportunities proposed included establishing an evidence hub, enabling workforce exchanges and capability-building initiatives, and partnering with First Nations stakeholders to co-design workforce pathways and training approaches. More broadly, it was suggested that ARIIA was positioned to convene stakeholders, elevate best practice,

and support system-level change that improves the capacity, cultural safety, and sustainability of the First Nations aged care workforce.

Short-term priorities that were agreed were:

- Development of a First Nations best-practice evidence hub
- Establishment of workforce exchange or placement programs to support knowledge sharing between organisations
- Hold a knowledge sharing event.

The project described in this report responds directly to these needs through a structured, First Nations-informed program of capability building and knowledge sharing.

First Nations Aged Care Workforce Support Program

The First Nations Aged Care Workforce Support Program was a national initiative led by ARIIA to strengthen the capability of the First Nations aged care workforce through knowledge sharing, mentoring, and collaboration. It gratefully received funding from the Equity Trustees Limited Ageing Well grant and was matched by equivalent in-kind support from ARIIA. The program was successfully delivered by ARIIA nationally between March 2025 and June 2026.

The program was grounded in the outcomes of the 2024 First Nations Aged Care Workforce Needs and Opportunities Roundtable with strong First-Nations led governance. It was designed as a bottom-up, sector-led approach to improving care quality through capability development. The program comprised three integrated activities:

Activity 1: First Nations Knowledge Hub

Development of a dedicated, culturally appropriate knowledge hub within ARIIA's existing platform, providing access to curated best-practice examples, case studies, and resources. This activity aimed to support organisations to identify and adopt evidence-informed approaches relevant to their local context.

Activity 2: Workforce Capability-Strengthening Knowledge Exchange Pilot

Piloting an initiative where participants from First Nations aged care organisations undertake knowledge exchange visits to host sites, which are already solving a shared problem and had been identified as best-practice providers. Participants received mentoring and developed implementation plans to adapt and apply learnings in their own organisations, contributing to workforce capability building and service improvement.

Activity 3: Knowledge Sharing and Networking

Facilitation of a First Nations aged care knowledge sharing event to strengthen relationships, support collaboration, and enabled ongoing exchange of knowledge and experience across the sector.

Collectively, these activities were designed to:

- Strengthen workforce capability through practical and experiential learning.
- Enable transfer and adaptation of best-practice models.
- Build a sustainable Community of Practice across organisations.
- Improve the quality and cultural safety of aged care services for First Nations older people.

First Nations Governance Group

The First Nations Governance Group was established as a direct extension of the 2024 First Nations Aged Care Workforce Needs and Opportunities Roundtable. Membership included First Nations aged care stakeholders and experts, community representatives and sector leaders, the Interim First Nations Aged Care Commissioner, and senior executives from NATSIAACC. The members provided ongoing direction, input, and advice for the development and implementation of the program. Ensuring governance was grounded in the leadership and expertise of First Nations stakeholders. Its role included:

- Providing guidance on priority areas and program design.
- Supporting the identification of best-practice examples and host organisations.
- Informing the implementation of the placement program and knowledge exchange activities.
- Contributing to the evaluation of program outcomes and identification of enablers and barriers.

Activity 1: First Nations Hub

The First Nations Hub is an integrated component of ARIIA's First Nations Aged Care Workforce Capability Building Program, designed to support Aboriginal and Torres Strait Islander aged care providers and workforce through access to culturally informed, evidence-based knowledge and practice.

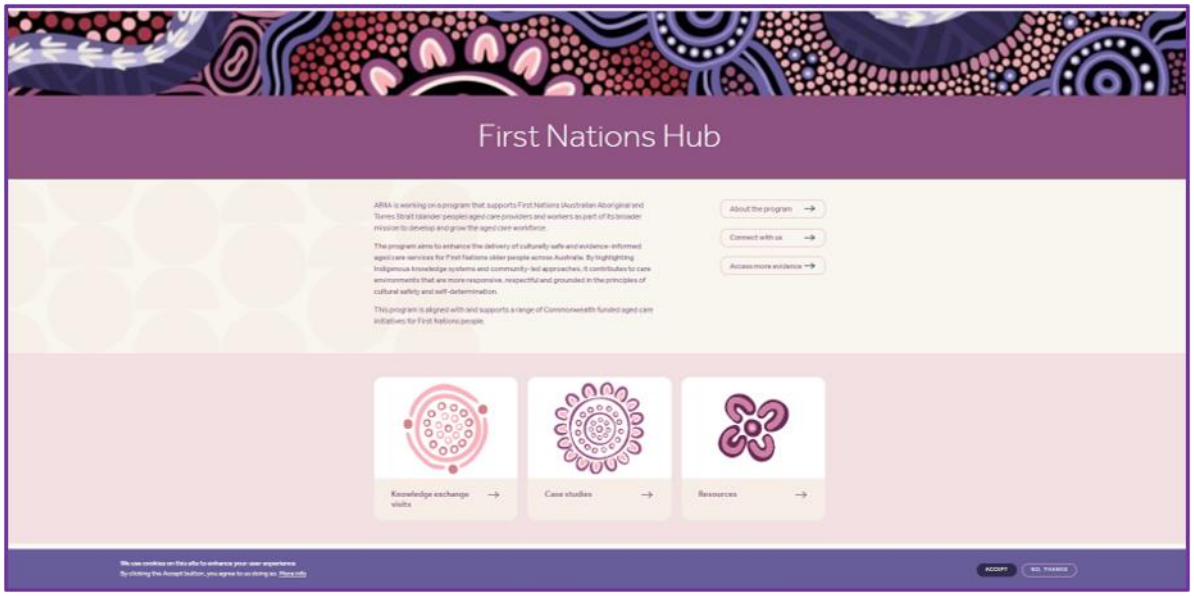

Image: ARIIA First Nation Hub, rights approved and reserved ARIIA ©.

At its core, the Hub provides a curated, accessible platform that brings together resources aimed at improving the delivery of culturally safe aged care. It has been co-developed with First Nations-aged care leaders, providers, and researchers. Ensuring that the content is relevant, practical, and aligned with Indigenous knowledge systems and community-led approaches.

A central feature of the Hub is its case study library, which showcases practical examples of culturally safe care in action. These case studies were developed through interviews with First Nations people and service providers, as well as published research. Each case study describes how the service was designed and delivered. It highlights what worked, the challenges encountered, and lessons that support reflection and learning across the sector. Individual care studies were collated into 'themed' case studies below.

The Hub includes a range of case study themes:

- Workforce capability building;
- Community-led models of care;
- Telehealth; and
- Peer support.

Overall, the themed case studies contain 11 individual organisational care studies covering four themes with another two due shortly:

- First Nations leadership; and
- workforce recruitment and retention.

Across these themes, case studies consistently explore:

- culturally safe service design and delivery.
- integration of cultural knowledge and lived experience.
- workforce development and capability building.
- community engagement and governance.
- implementation challenges and enabling factors.

Beyond the case studies, the First Nations Hub provides a curated suite of more than 250 First Nations resources from external organisations across the Australian health and aged care sector, including:

- guidance, policy and frameworks.
- external sector research, reports and resources.
- podcasts and narrative-based content sharing lived experience.
- practical implementation insights and tools for providers.
- access to pre-designed PubMed-based database searches specific to First Nations care.

The Hub also integrates with broader ARIIA program activities, particularly knowledge exchange visits and knowledge sharing events, enabling users to move from passive learning (reading case studies) to active capability building (peer learning and implementation). Overall, the First Nations Hub is positioned as a translation and amplification mechanism, bridging the gap between existing local, community-led innovations, and wider sector uptake and implementation. It supports providers, leaders,

and workforce to adopt and adapt best-practice approaches, thereby strengthening culturally safe aged care delivery across Australia.

Hub usage

Early engagement findings are promising. With over 4 topics (12 case studies) and 250+ resources, there have been nearly 2,500 views by 1,253 users for the Hub.

External Media Coverage of the Hub Launch

- National Indigenous Times. *Aged Care Research & Industry Innovation Australia launches new First Nations Hub*.
- Australian Ageing Agenda. *ARIIA launches First Nations hub*.
- Inside Ageing. *ARIIA launches new First Nations Hub to strengthen culturally safe aged care*.
- MindNell. *ARIIA launches First Nations hub*.
- ARIIA. *ARIIA launches new First Nations Hub*.

Presentations on the First Nations Hub

- Sector Support and Development (SSD) Aboriginal and Torres Strait Islander working group meeting (14 APRIL 2026).
- Presentation to senior policy members from NATSIAACC, Office of Inspector General of Aged Care, Office of Interim First Nations Aged Care Commissioner (20 February 2026)
- Presentation to Aged Care Safety and Quality Commission (20 March 2026)
- NSW aged care conference (2 April 2026)
- Remote Accord (28 April 2026)
- ARIIA First Nations Workforce Capability Roundtable (5 May 2026)
- ARIIA Webinar: “Workforce Capacity and Capability to Support First Nations Aged Care” (17 June 2026)
- NATSIAAC National Yarning Circle (24 June 2026)

Activity 2: Workforce Capability-Strengthening Knowledge Exchange Pilot

From the 2024 Roundtable recommendations, it was proposed to develop a capability-strengthening program for aged care leaders that supported them to learn about a new model of care and/or capacity building model, and to adapt or implement this back to their organisation. It was planned that participants would also share lessons learnt with the First Nations Aged Care Hub and the wider community to support implementation and translation of the knowledge they have gained.

Knowledge Exchange Program Design

The Knowledge Exchange Visit Program was designed to ensure a culturally safe, transparent, and strengths-based process that supported meaningful capability development for participants and partner organisations. The program emphasised relationship building, informed choice, and shared accountability at each stage of the exchange. It was designed as a pilot to explore the value and process of the initiative.

Recruitment of applicant leaders was held via an Expression of Interest (EOI) in January 2026. Applications were shortlisted against criteria that met program objectives and reviewed for suitability by the First Nations Governance Group. Once the three leaders were selected, potential partner organisations were contacted to confirm their capacity to provide the services, supervision, and learning opportunities required for the exchange. ARIIA coordinated all logistical arrangements, including travel, accommodation, and backfill support where required. Unfortunately, one organisation had to withdraw prior to commencement because

Prior to the commencement of the Knowledge Exchange Visit, participants completed a pre-exchange survey to capture baseline expectations, learning objectives, and self-identified capability areas. The Knowledge Exchange Visit then commenced, with participants encouraged to complete a daily reflection log to support structured learning, critical reflection, and ongoing feedback throughout the experience. Participants discussed their observations with their mentor to critically reflect on what they saw and consider how the approach may need to be adapted for their own context. At the conclusion of the exchange, post-visit surveys were distributed to both participants and partner organisations to capture outcomes, reflections, and opportunities for improvement.

Participants were also supported to develop a testimonial or short report for the ARIIA website, sharing insights and learnings from their experience. Importantly, the program extends beyond the exchange itself, with ARIIA continuing to work alongside participants and their organisations to embed post-experience learning and support the implementation of ongoing capability-building initiatives through free scholarship places within ARIIA's Innovation Capability Program: https://www.ariia.org.au/programs/workforce/innovation-capability-program

The Knowledge Exchange Program Findings

Outcomes, Enablers, Barriers and Key Insights for the Exchange visits

The pilot of the Knowledge Exchange Program demonstrated that experiential, peer-to-peer learning is a valuable approach for strengthening capability within First Nations aged care organisations. Participants reported increased confidence, knowledge and practical understanding of service delivery models, supported by the opportunity to observe best-practice firsthand, engage directly with experienced peers and discuss the adaptation of approaches to their own organisational context. The pilot enabled participants to move beyond theory and policy, providing real-world examples of how challenges were being addressed in comparable First Nations and community-controlled settings.

A key outcome was the translation of learning into tangible organisational improvement opportunities. For one participating leader, the visit strengthened understanding of Support at Home implementation requirements, including service delivery processes, budget management, claiming systems, My Aged Care navigation, organisational capacity requirements and administrative systems. The participant identified practical actions including development of internal program manuals, process flowcharts, staff training and pilot implementation activities, with success to be measured through improved access to services for Elders. For the other participant from Residential and Community Care, the exchange supported a comprehensive review of the mealtime experience, with learnings informing improvements to resident engagement, menu planning, dining environments, food presentation, cultural appropriateness, nutrition monitoring and food wastage management. The knowledge gained is being used to inform both operational changes and planned infrastructure upgrades.

Across both exchanges, several common enablers of successful knowledge transfer were identified. These included access to a host organisation operating in a similar environment,

opportunities to observe practices in real time, structured reflection and discussion with mentors, and the ability to compare observed approaches against local organisational systems and priorities. Participants highlighted the value of relationship-building, knowledge sharing and ongoing peer support, noting that learning from organisations facing similar workforce, service delivery and community challenges increased the relevance and practicality of the experience.

The findings also reinforced that successful implementation requires adaptation rather than replication. Participants consistently recognised that effective models must be tailored to local circumstances, community preferences, workforce capability, infrastructure, cultural context and organisational readiness. The exchange process provided an opportunity to critically assess observed approaches and consider how they could be modified to meet local needs while maintaining cultural safety, quality and sustainability.

Several barriers to implementation were identified. Participants noted the resource intensity associated with organisational change, including the need for staff training, administrative capacity, system configuration, consultation processes, procedural review and ongoing management support. In addition, the diversity of First Nations communities means that practices observed in one location may not transfer directly to another without careful consideration of local cultural, geographic and operational factors. Participants also highlighted the importance of continued support beyond the visit itself to help maintain momentum and address implementation challenges as they arise.

A particularly important finding was the value of ongoing relationships between participant and host organisations. Both exchanges identified benefits from continued mentoring, networking and peer learning following the visit. Participants viewed the Knowledge Exchange not as a standalone activity but as the beginning of an ongoing learning partnership that could support implementation, problem solving and continuous improvement. This finding aligns strongly with the broader ARIIA program objective of fostering a sustainable community of practice across the First Nations aged care sector.

Overall, the pilot demonstrated that knowledge exchange visits can be an effective mechanism for workforce capability building, implementation support and sector connection. It enabled participants to acquire practical knowledge, build professional networks, strengthen confidence in organisational change processes and identify realistic pathways for adapting best-practice approaches within their own services. The findings

suggest that future iterations of the initiative would benefit from continued emphasis on relationship-based learning, culturally safe mentorship, implementation support and opportunities for ongoing peer connection beyond the initial exchange experience.

> *"I would like to sincerely thank ARIIA, the host organisation, and everyone involved in facilitating this opportunity. The experience provided valuable insights, practical learnings, and meaningful opportunities for professional growth and sector collaboration.*
>
> *I would also like to acknowledge the host sponsor for his generosity, leadership, and willingness to share his knowledge and experience throughout the exchange. His openness and commitment to supporting the learning process were greatly appreciated and contributed significantly to the value of the visit.*
>
> *The Knowledge Exchange reinforced the importance of collaboration, innovation, and knowledge-sharing across the aged care sector, and I look forward to applying many of the learnings within our organisation."*
>
> *<Knowledge Exchange Participant>*

Enablers and Challenges for the Program Delivery

Based on the stakeholder, participant and Governance Group feedback provided throughout the program, the Knowledge Exchange program was consistently viewed as a highly valuable and worthwhile initiative. One participant described the experience as providing "valuable insights, practical learnings, and meaningful opportunities for professional growth and sector collaboration," noting that it reinforced the importance of collaboration, innovation and knowledge-sharing across the aged care sector. She also expressed appreciation for access to an opportunity that gave learnings that she could translate into practice within her own organisation. Host feedback was similarly positive. In addition, host organisations also demonstrated strong engagement and support for the initiative from the outset, describing their organisation as "pleased to be involved in this program" and expressing enthusiasm to participate. Collectively, these responses suggest that the program was well received by both participants and host organisations, with stakeholders valuing the opportunity for peer learning, knowledge exchange, relationship building and practical workforce development.

As with pilot programs, the delivery of the Knowledge Exchange Program encountered several challenges related to timing and operating within a thin market context. Significant

preparatory work was required to ensure each Knowledge Exchange Visit was culturally safe, well planned, and positioned for success. As a result, program timelines extended beyond initial expectations. The Expression of Interest (EOI) process was promoted in the weeks leading into the Dec/Jan holiday period which may have limited the ability of some potential applicants to engage fully with the process despite interest in the program.

These timing pressures were compounded by the realities of operating within thin markets, particularly in First Nations led aged care contexts. Senior staff often hold critical operational and leadership roles, making it challenging to step away from service delivery for a defined period without impacting organisational capacity, so shorter or multiple visits, and hybrid in person/online combinations were needed. This was exemplified by the withdrawal of one of the 3 organisations awarded a place in the program. Similarly, identifying partner organisations with the available staff, resources, and flexibility to support a Knowledge Exchange Visit required careful negotiation and, in some cases, extended lead times. Together, these factors influenced participation and scheduling and highlighted the importance of flexible program design and delivery, realistic timeframes, and ongoing relationship-based planning when delivering capability building initiatives in resource constrained environments.

Recommendations for improvement of program delivery

Several refinements to Knowledge Exchange Visit deployment could strengthen accessibility, impact, and sustainability while maintaining the relational and culturally safe foundations of the model. Collectively, these refinements reinforce that effective knowledge exchange in First Nations aged care contexts requires not only strong program design, but also flexibility, realistic timeframes, and ongoing relational support beyond the visit itself.

1. Improved timing and program pacing. Longer promotion and application windows may enable senior staff to engage more fully without competing pressures. Similarly, building greater flexibility into visit scheduling, including shorter or split exchanges, could improve participation in thin market contexts where absence from operations for extended periods is challenging.

2. Strengthen preparatory and post visit supports to maximise the long-term impact of each exchange. While mentoring, reflection logs, and reporting were embedded effectively during the visit, future iterations could benefit from more structured pre visit scoping and

clearer articulation of implementation expectations. This could include facilitated pre-exchange planning sessions to sharpen focus areas and align host and participant expectations more precisely. We trialed this with one Exchange participant and host and it proved to be a very helpful strategy.

3. Expand the pool of host organisations and explore shared or reciprocal exchange models to address capacity constraints. Supporting organisations to participate as hosts through clearer resource guidance or recognition may increase willingness and readiness to engage.

Activity 3: Knowledge Sharing and Networking

Building on previous engagement at the initial roundtable event in 2024, this Roundtable represented a continuation of ARIIA's role as an ally, seeking to:

- listen to and learn from lived experience and practice;
- identify practical, community-led priorities for workforce development; and
- explore how ARIIA can contribute in a way that supports, rather than duplicates, existing First Nations-led work.

Image: Participants of roundtable 2026, rights approved and reserved ARIIA ©.

The 2026 First Nations Aged Care Workforce Capability Roundtable brought together community leaders, service providers, researchers, government representatives, and sector stakeholders to explore current challenges and opportunities for workforce capability building in ways that are culturally grounded and responsive to the needs of First Nations Elders and communities. Stakeholders brought expertise across service delivery in urban, rural, and remote settings; workforce development and training; policy; funding; and governance, ensuring that a diverse range of perspectives would be shared. The discussion reinforced the importance of First Nations leadership, cultural authority, and community-defined solutions as central to any future action.

Key discussion themes

1. Culturally Safe, Community-Led Models of Care

A central theme was that culturally grounded, First Nations-led models of care are the most effective in meeting the needs of Elders and communities. These models are holistic, place-based, and built on trust, relationships, and shared decision-making, often extending beyond formal service boundaries to respond to community realities. Mainstream models frequently fail to align with cultural expectations, contributing to delayed access and unmet need. Flexible funding, improved use of culturally knowledgeable staff, and better evaluation and sharing of what works were identified as critical enablers to strengthen these approaches.

2. Workforce Capability and Sustainability

Workforce challenges - including staff shortages, high turnover, and limited access to culturally safe training - are significantly affecting service delivery. There is a strong need to build and retain a local First Nations workforce, recognising lived experience, cultural obligations, and community connections as core capabilities. Training systems require reform to move beyond clinical models and incorporate culturally safe, mentoring-based, and flexible approaches. Sustainable workforce development also depends on addressing structural issues such as career pathways, remuneration, and workforce support mechanisms.

3. Systemic Barriers and Structural Challenges

Stakeholders identified persistent system-level constraints that limit effective care and workforce development, including fragmented funding, high administrative burden, and

regulatory frameworks that do not align with First Nations ways of working. These challenges are compounded by underinvestment, inequities in rural and remote areas, and policy settings that constrain ACCOs and smaller providers. A lack of trust - driven by repeated consultation without action, deficit-based approaches, and limited transparency - continues to undermine system effectiveness, alongside broader power imbalances in decision-making and implementation.

4. Priorities for Reform and Innovation

Clear priorities for reform include strengthening ACCHO-led services, embedding First Nations leadership in decision-making, improving culturally safe care across providers, and investing in workforce development and transition support. Innovation opportunities focus on leveraging technology and AI, improving data use and visibility of community needs, protecting data sovereignty, and learning from successful models of care. There is also strong emphasis on better collaboration, knowledge sharing, and building evidence to inform more effective and sustainable system change.

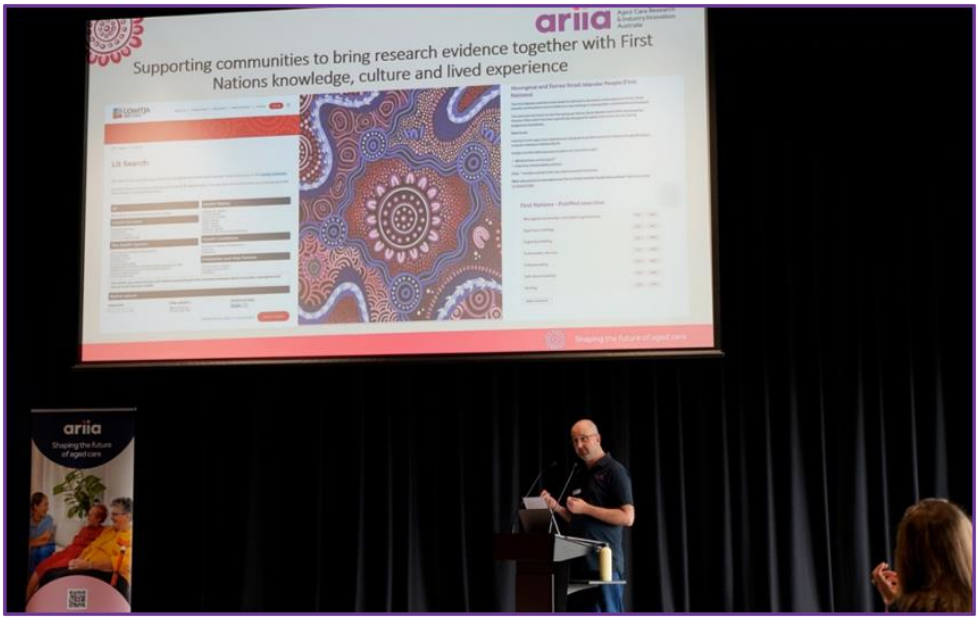

Image: Presenter at roundtable 2026, rights approved and reserved ARIIA ©.

5. Collaboration and Knowledge Sharing

The importance of sustained collaboration across the sector was strongly emphasised, including partnerships between First Nations organisations and mainstream providers.

Stakeholders highlighted the need for practical, implementation-focused support and platforms that enable peer learning, exchange of knowledge, and sharing of successful local innovations. Avoiding duplication and building upon existing work were key principles, with a clear call for mechanisms - such as communities of practice - to support ongoing connection, coordination, and dissemination of best practice across the sector.

Mapping of Roundtable Opportunities to ARIIA Action

The mapping exercise and subsequent group reflections positioned ARIIA's role as complementary rather than duplicative—focused on enabling, amplifying, and connecting existing First Nations-led activity. The strongest alignment for ARIIA sits in building and sharing the evidence base of "what works" in culturally safe aged care, including documenting practice that occurs outside formal funded models and making this knowledge accessible across the sector. This includes establishing mechanisms such as evidence hubs, facilitating knowledge exchange between providers, and supporting dissemination of best practice to enable adaptation across diverse communities.

ARIIA is also clearly positioned to play a convening and enabling role—bringing together stakeholders, strengthening collaboration, and supporting a shared agenda for workforce capability building. This includes amplifying First Nations-led research, policy and advocacy, and supporting ACCOs through evidence generation and sector-wide influence, while maintaining a clear commitment not to replicate work already being led effectively within communities. In this way, ARIIA's contribution aligns most strongly with system-level functions: coordination, knowledge translation, and capacity building at scale.

Finally, the mapping highlights ARIIA's role in supporting long-term workforce development through advocacy and program design that aligns with sector priorities. This includes contributing to evidence-based funding models, supporting initiatives that increase First Nations workforce participation, and embedding culturally safe, community-led approaches into workforce programs. Overall, ARIIA's optimal fit is as a trusted ally and enabler—supporting First Nations leadership, strengthening capability through evidence and innovation, and connecting efforts across the aged care system to deliver more culturally grounded and sustainable outcomes.

Core functions suggested:

- Build the evidence base of what works in First Nations aged care

- Support First Nations-led research, policy and advocacy

System level contributions:

- Facilitate collaboration and knowledge exchange across stakeholders
- Amplify culturally safe practices and successful models
- Support development of workforce capability initiatives aligned to community priorities.

> *"[The RoundTable report] is a thoughtful and practical piece of work that captures many of the workforce, service delivery and system challenges experienced by Aboriginal and Torres Strait Islander aged care providers across Australia, while recognising the strengths, innovation and leadership that already exist within First Nations communities and organisations. I particularly appreciated the way the report clearly articulates ARIIA's role as an ally, knowledge partner and implementation enabler, working alongside First Nations leadership and supporting—rather than duplicating—existing work. That clarity of purpose provides a strong foundation for meaningful collaboration across the sector."*
>
> *<NATSIAACC CEO>*

Additional secondary outcomes from program activities

The philanthropic grant execution has built capability and capacity in the ARIIA team; this has enabled other ARIIA-funded activities that are synergistic:

ARIIA Reconciliation Action Plan (RAP)

In 2026, ARIIA developed its approved Reflect RAP to establish a strong foundation for reconciliation by building relationships, deepening cultural understanding, and embedding inclusive practices across ARIIA's work. Our RAP recognises reconciliation as an ongoing responsibility that requires listening, learning, and acting in partnership with Aboriginal and Torres Strait Islander peoples, with a clear commitment to ensuring their voices are central to decision-making. Through this initial stage, the RAP is designed to strengthen connections with communities, enhance cultural awareness within the organisation, and

create the conditions for meaningful, respectful collaboration that reflects the needs and aspirations of Elders, older people, and their communities.

The actions within the RAP translate this intent into a structured program of work focused on relationships, respect, opportunities, and governance. Key actions include establishing and strengthening partnerships with Aboriginal and Torres Strait Islander organisations, promoting reconciliation through ARIIA's sphere of influence, embedding anti-discrimination practices, and increasing cultural capability through learning and engagement. ARIIA prioritises co-design with First Nations partners, development of culturally appropriate policies and protocols, improvement of employment and procurement outcomes, and the establishment of governance structures to track progress and ensure accountability. Collectively, these actions are intended to embed reconciliation into everyday practice while positioning ARIIA to deliver sustained, measurable progress in future RAP phases.

Signatory to the SA Aboriginal Health Research Accord 2026-2036

ARIIA's First Nations program and First Nations Governance Group were established in October 2024. During the setup of this group, best-practice approaches for allyship were explored to inform co-design of the First Nations Aged Care Workforce Capability Building Program's 'Ways of Working' agreement. These approaches included respectful engagement, acknowledgement of data sovereignty, and protection of intellectual property. This agreement underpins how ARIIA works with the First Nations sector to support the capacity and capability building of First Nations aged care providers and workforce, with the aim of ensuring culturally appropriate care for older Australians. The SA Aboriginal Research Accord 2016–2026 was one of the foundational documents that supported this ideation process, and the Guiding Principles are evident in how ARIIA operationalises its program of work.

Image: Signatories of Accord 2026.

ARIIA was pleased to be a signatory to the recent refresh of the Accord. Our commitment as a signatory is that the Accord will be embedded as part of our RAP, First Nations program of work, philanthropic aims, and upcoming grant rounds.

Allyship in tenders and research grant submissions

Across three recent tender submissions in the First Nations care workforce space, ARIIA's approach demonstrates a consistent commitment to working in genuine partnership with Aboriginal and Torres Strait Islander organisations and communities. In a recent proposal for culturally safe mentoring, developed in collaboration with partners Booroongen Djugun Limited, the model emphasises co-design with stakeholders, integration of ACCO-led knowledge, and the creation of wrap-around support networks involving local providers, community-controlled organisations, and employers. This work prioritises relational approaches, cultural governance, and community-led engagement, ensuring that programs are aligned with local priorities and that partnerships extend beyond delivery to support ongoing workforce pathways and community outcomes.

Across the broader tender activity—including workforce readiness in the disability workforce and capability building for chronic health—ARIIA's contribution reflects a clear focus on strengthening workforce capability through culturally safe, evidence-informed and accessible training approaches. The mentoring tender explicitly demonstrates how programs are designed to build confidence, leadership readiness, and sustained

employment outcomes, while addressing barriers faced by First Nations participants, particularly in regional and remote contexts. Consistent with this, ARIIA's role across these tenders positions the organisation as a constructive and responsive ally—supporting First Nations leadership, embedding cultural safety into program design and evaluation, and working alongside sector partners to build a more capable, inclusive, and culturally grounded workforce.

Next steps

Following the success of this philanthropically funded program, ARIIA has committed to:

1. Leveraging this work to obtain additional philanthropic funding to undertake initiatives from the 2026 Roundtable.

2. Maintaining the First Nations Hub, adding new resources and case studies where possible, including case studies from the Knowledge Exchange pilot once these initiatives have had time to be implemented.

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About the artwork and artist

My name is Amy Kilby, and I am a proud Wiradjuri woman from the Riverina, NSW. Art has been a lifelong passion of mine, beginning with painting and drawing as a child. As technology has advanced, so too has my artistic journey, leading me to specialise in graphic design and digital contemporary Aboriginal art. This evolution has allowed me to merge traditional cultural storytelling with modern digital mediums, creating impactful and meaningful artworks that celebrate my Indigenous identity and heritage.

Amy Kilby, Graphic design, digital contemporary Aboriginal art
www.amykilby.com

This artwork, **Journey of Care and Connection**, has been created to represent ARIIA's First Nations-focused program of work. It embodies the themes of respect, innovation, and collaboration, while honoring the role of Elders and communities in shaping the future of aged care.

At the heart of the design are the central meeting places, which symbolise ARIIA as the connector. These hubs represent the organisation's role in bringing together communities, Elders, researchers, government and aged care leaders to share knowledge, exchange ideas and co-design meaningful solutions. Surrounding these are smaller gathering places, which represent the many communities across the nation that ARIIA works alongside, highlighting diversity, inclusion and the strength of partnership.

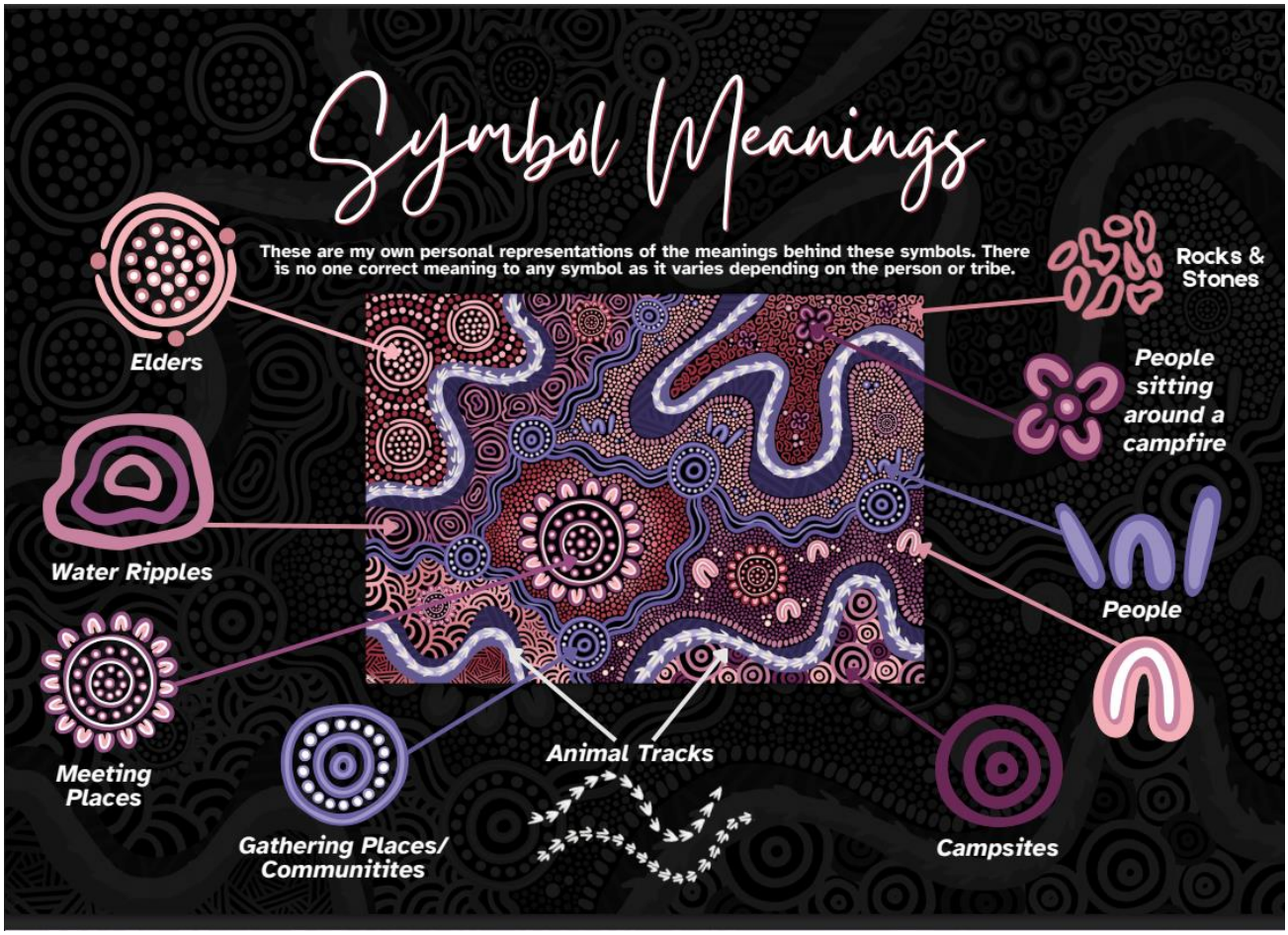
Flowing outward from the gathering places are pathways that connect each place. These pathways reflect the many journeys' people take, each beginning and ending at different points, yet all connected by the

broader vision of care and collaboration. They symbolise inclusivity and innovation and speak to the understanding that aged care is not a single, linear path but one made up of many interconnected experiences. The pathways also reflect ARIIA's role as a relationship builder and a guide, walking alongside people and supporting them to achieve their goals.

The presence of Elder symbols acknowledge the cultural knowledge and wisdom that are central to Aboriginal and Torres Strait Islander communities. The ripples around them represent knowledge and experience being passed down through generations, carrying stories, resilience and strength into the future.

Animal Tracks, mountains, stones and water ripples flow across the piece, representing courage, communication, and ARIIA's willingness to try new ways of thinking. These tie the artwork back to Country, reminding us that care and connection are deeply rooted in people, place and culture. The inclusion of the water and land elements emphasises sustainability, growth, and the interdependence of all communities.

Together, **Journey of Care and Connection** is a visual representation of ARIIA's commitment to reconciliation. It celebrates Elders, strengthens relationships and reflects the organisation's dedication to walking alongside Aboriginal and Torres Strait Islander peoples to build a more inclusive, respectful and supportive aged care sector for generations to come.



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