

Bobby Goldsmith

Foundation

STRATEGIC ORIENTATIONS

2024 - 2028



INTRODUCTION

BGF is Australia's oldest community-based HIV organisation, providing practical, emotional and financial support to all people with HIV in New South Wales (NSW) and South Australia (SA). Founded in 1984, when a group of friends got together to give their mate, Bobby Goldsmith, the care he needed whilst he was succumbing to AIDS, BGF has gone on to provide that same individualised care and support to thousands of Australians.

HIV treatment has come a long way since those early days of the HIV/AIDS epidemic, and so has the Foundation. We are now a highly professional not-for-profit organisation, able to offer a range of tailored services, supports and programs to diverse people with HIV.

As an organisation that has always focused on, and been supported by the LGBTQIA+ community, and following on from opportunities identified in the Disability and Aged Care Royal Commissions, we have now identified a need to broaden the scope of supports offered by the organisation to include a broader demographic which includes everyone from the first generation to age with HIV, newly emerging communities of PLHIV, the broader LGBTQIA+ community and people from all walks of life looking for progressive disability and aged-care supports.

This Strategic Orientations document sets out how we will achieve our vision which is to support these people to thrive and achieve their fullest potential over the coming years, with a particular focus on the needs of people living in NSW and SA and the possibility to expand more nationally where appropriate and possible

OUR VISION

To help our clients and communities to thrive.

OUR MISSION

BGF provides high quality client services, health promotion programs and aging and disability supports, as well as advocating with and for our clients and communities.

Our mission is to:

- Provide the best client support services we can
- Broaden our reach to new communities
- Provide evidence-based outcomes
- Be a voice that influences public policy
- Ensure a sustainable future for our organisation

Primarily funded by NSW Health, we are a key partner implementing the NSW HIV Strategy by supporting people with HIV to remain treatment adherent, retained in care and by providing psycho-social support.

We also work to reduce the effects of stigma and discrimination on our clients, reduce their social isolation and help them to improve the quality of their lives. We are now broadening our Community Support Program to ensure more community members have access to progressive, quality disability and aged care supports.

OUR VALUES

Our four core values set out below are the foundation on which BGF is built. They are the guiding principles that determine our culture, our client experience and who BGF is as an organisation. More than this, they underpin our whole operation, setting the expectation for workers' behaviour, outlining what clients can expect and supporting how and why clients and workers are attracted to the organisation. BGF strongly encourages all staff to embody our core values in everything they do.

Inclusivity:

We celebrate the unique backgrounds, experiences and strengths each person brings to our community. We promote diversity and treat everyone with respect and courtesy.

Compassion:

We genuinely care about the wellbeing and potential of our clients and our team. We understand and empathise with their experiences and challenges, offering support without judgement.

Empowerment:

We are committed to helping everyone feel supported to achieve their goals. We enable our clients and team members to live fulfilling, self-directed lives.

Solidarity:

We actively listen and empathise with our clients and colleagues. We put ourselves in the shoes of others to build stronger, more supportive communities.

THE CURRENT NEEDS OF PEOPLE LIVING WITH HIV

Each week we see more and more people from diverse backgrounds walk through our doors. We support those from the first generation of people to age with HIV to a diverse new generation facing stigma within their communities.

The most recent data suggests that there are around 28,870 people with HIV in Australia. Of those, nearly 90% have been diagnosed and the vast majority of those who have been diagnosed are on treatment. And the vast majority of those are treatment adherent. This indicates that Australia is well placed to meet the 95-95-95 target set by UNAIDS.

There have been some significant shifts in the HIV epidemic in Australia in recent years, with sharp declines in new infections among some groups of gay and bisexual men (particularly those in inner city Sydney and Melbourne) due to high uptake of Pre-Exposure Prophylaxis. Despite those welcome shifts, nationally, gay and bisexual men still make up the majority of those being diagnosed with HIV (60% in 2021). Today, heterosexual men and women make up a growing proportion (27%) of those newly diagnosed with HIV.

There is significant concern about those populations who may not be experiencing the full benefit of recent improvements in HIV prevention, diagnosis and treatment in Australia. Of particular concern are the ongoing patterns of late diagnosis, including among international students and people from culturally and linguistically diverse backgrounds.

Diagnoses among Aboriginal and Torres Strait Islander people have fluctuated in recent years. After a steep rise in new diagnoses in the period 2011-2016, diagnoses have subsequently declined. Despite this, the HIV notification rate remains unacceptably high (at 2.3 per 100,000 among First Nations people, compared to 1.7 per 100,000 among non-Indigenous people), highlighting the need for culturally responsive services and programs.

The majority of people with HIV living in Australia will experience near-normal life expectancy and we know from research, and from our clients' stories, that most people with HIV are resilient and work hard to manage their health and wellbeing.

We also know that people with HIV continue to face many challenges that others in the wider community do not. These include:

- Mental health, and social and emotional wellbeing. People with HIV exhibit higher rates of mental health challenges, can be at higher risk of social isolation and are over-represented among those experiencing suicidality
- People with HIV experience the effects of ageing earlier in life, due to both the virus itself and the side effects of long-term treatment
- One-third of people with HIV in Australia live in poverty and struggle to meet daily living expenses. This has been intensified by the recent cost of living crisis
- Stigma and discrimination continue to be significant issues for people with HIV, in both their private and their public lives, as well as when accessing health and social services
- Within this, people with a long-term HIV diagnosis often have quite distinct experiences and needs compared to those more recently diagnosed.

There are also a number of gaps in the current response to HIV, disability and aging including:

- The need for disability and aged care services that are safe, inclusive and knowledgeable about HIV and LGBTQIA+ matters
- Equitable access to the NDIS and Aged Care packages among eligible people
- The need for a tailored person-centred response – at an individual and population level – to the needs of priority populations of PLHIV and the disability and aging LGBTQIA+ community
- The need for more holistic models of care, including access to peer support among all people with HIV
- For all people with HIV to have access to up-to-date and reliable information about HIV, including health literacy, psycho-social risk factors and access to care
- The need for improving the quality of life of people with HIV to be elevated to a policy priority alongside diagnosis, uptake of treatment, and undetectable viral load (referred to as 'the 4th 90').

OUR ROLE

Our work has always been built on empowering people with HIV to thrive. Moving forward we will expand this philosophy to provide direct support to a broader community, to access services (specialist and mainstream) that they need.

Our current services for PLHIV include:

- Case work (supporting our clients in practical, financial and emotional ways whilst linking them to the services they need)
- Case management (providing those clients with complex needs with more holistic support and care coordination)
- Specialist support for people experiencing issues with drug and alcohol use (via an integrated care program led by the Haymarket Foundation)
- Health and well-being programs that develop practical life-skills, support self-expression, reduce social isolation and build peer connectedness
- Financial counselling (providing financial advocacy and educating clients on prudent management of their financial affairs)
- Community Support Program (delivering regular, practical support and care at home and in the community)
- Contribution to policy development, advocacy and research – individually and systemically – for people with HIV.

In addition, through broadening of the service demographic we will be a trusted disability and aged care service provider, delivering:

- Community Support Program (regular, practical support and care at home and in the community), which will enable care recipients to remain autonomous and independent, living lives of their own choosing.

We work in collaboration with the HIV body positive and with other organisations, both HIV- specialist, broader LGBTQIA+ community and mainstream organisations, as well as relevant peak bodies, including:

- Other HIV organisations, including NAPWHA, Positive Life NSW, ACON, Thorne Harbour Health, SAMESH etc.
- HIV services in each Local Health District within NSW and Local Health Networks in SA
- LGBTQIA+ peak organisations, including Health Equity Matters, Silver Rainbow Alliance, LGBTQIA+ Health etc.
- Other community organisations and services working with affected populations, including First Nations and multicultural organisations
- Universities and institutions of learning and development
- NSW Health, SA Health and other funders and grantors, including NDIA and MyAgedCare.

Our role is to improve the overall quality of life of people we support – people living with HIV, the broader LGBTQIA+ community and allies looking for progressive care with particular attention on their health and wellbeing, including addressing barriers to retention in care and adherence to treatment.

OUR GOALS

Goal 1: Improve quality of life (or outcomes) among clients and communities through quality services, supports and programs

Goal 2: Contribute to an enabling policy environment

Goal 3: For BGF to be a strong, effective and sustainable organisation

Goal 1: Improve quality of life (or outcomes) for the people and communities we support through quality services, supports and programs

Supporting people with HIV to live life on their terms is at the heart of BGF's work. Through our individualised client support, our health and wellbeing programs and our community support program (including disability and aged care supports), we see people at their most vulnerable and at their best. Our role is to provide holistic support that builds autonomy, wellbeing, connectedness and health and assists in tackling the negative impacts of stigma.

Over the past four years, we have strengthened our services and programs. Today, our psycho-social services (case work and case management), financial counselling and Community Support Program (in-home support) are best-practice and consistently achieve high client satisfaction scores. Likewise, our health and wellbeing programs have grown in both reach and impact and provide people with HIV with opportunities for both personal growth and community connectedness. Having formally registered as an NDIS provider, BGF is now well placed to expand our community support program to provide disability and aged care supports to a broader service demographic encompassing the LGBTQIA+ community and allies looking for progressive care.

Over the coming four years, we will continue working to improve the reach and accessibility of our services and programs including formal registration to provide aged care support services. We have made a significant step toward this through opening an office in Western Sydney. This is an important step to being more accessible to our clients in Western Sydney and will provide increased opportunities to collaborate with First Nations and multicultural community organisations and services.

1.1 Continuing to offer high quality individual client services (case work, case management, community support, financial counselling, disability and aged care services)

1.2 Continuing to offer high quality health and well-being programs for people living with HIV

1.3 Strengthen referral pathways into BGF, through consultation with community and engagement with partners, including First Nations and CALD organisations and mental health, disability and aged care service providers

1.4 Expanding access to services, supports and programs for diverse groups of people with HIV, through:

1.4.1 Maintaining and strengthening our offerings in the Northern Rivers and in SA

1.4.2 Improving the cultural responsiveness of, and access to, our services and programs among First Nations people

Contribute to the NSW Health BBV-STI Aboriginal Reference Group

Partner with First Nations organisations, including Blaq, PATSIN, ACCHOs (e.g., Tharawal) to ensure broader cultural awareness

Adapt our programs and services to be more culturally responsive.

1.4.3 Collaborating with key community organisations and relevant services (including Aboriginal Community Controlled Health Services, multicultural services and mental health services)

1.4.4 Adapting our offerings to improve reach and relevance to key cohorts of people with HIV

1.5 Leveraging our status as a registered NDIS provider (and soon to be registered MyAgedCare provider) to offer services to people we support – people living with HIV, the broader LGBTQIA+ community and allies looking for progressive care

1.6 Maintaining our Client Reference Group, to ensure that BGF's clients have a voice in strategic and operational priorities.

Goal 2: Contribute to an enabling policy environment

Australia has been fortunate to have a strong policy framework underpinning its HIV response from the inception of the epidemic. This continues today with effective HIV strategies in place at both the state and national level. Together, these policies set the priorities for improving the health of people with HIV and preventing new HIV infections in Australia. Maintaining a coherent and committed health system response to HIV, and to people with HIV, is a high priority.

However, the daily life, wellbeing and autonomy of many people with HIV is shaped by a range of issues outside the health domain. These social determinants of health include access to affordable housing, transport, employment and connection to community, and the experience of stigma in engaging with services and in media, laws, and broader society. Strengthening the broader social policy environment thus has the potential to be of significant benefit to people with HIV.

BGF is well-placed to contribute to this work. With more than 750 individual PLHIV clients being actively supported by our Client Services team each year, we have unique insights into our clients' lived experiences, including their future needs.

We will do this in collaboration with partner organisations. In order to do this, we will ensure that we have systems and processes for gathering client data and client voice and capturing the practice wisdom of our staff; have strong partnerships with other HIV and related organisations; and connections to stakeholders, including government and media, that create opportunities for us to advocate on behalf of our clients as needed.

We will achieve this goal through:

2.1 Continuing to work in collaboration with key partners, including ACON, Positive Life NSW, SAMESH, and national peak bodies, on policy submissions relevant to our clients

2.2 Continuing to collect, analyse and share (de-identified) population-level client data, feedback from the Client Reference Group and practice wisdom, to highlight trends and unmet needs

2.3 Contributing to relevant research initiatives, within our role and capacity

2.4 Developing a customer value proposition that will inform future communications strategies that includes messaging for key stakeholders, including media, so that policy and media coverage are informed by data. Mapping our stakeholders to better understand their interests, investments and priorities.

2.5 Maintaining and strengthening working relationships with governments, funders and other political stakeholders.

Goal 3: For BGF to be a strong, effective and sustainable organisation

We strive to continue to be an organisation that is trusted, respected and relied upon by our clients, a leader in the health and wellbeing sector, visible in our communities and a gold standard employer.

We are immensely proud of the organisation that BGF has become and over the coming four years we aim to continue to build on our strengths and to adapt to meet the current and diverse needs of people we support in order to further strengthen our service offering to people living with HIV.

Our workforce is integral to this. Each staff member brings highly valued knowledge, skills and experience to their roles. This includes our growing peer workforce, who are a key point of connection between our organisation and our clients and communities. Sustaining our workforce and continuing to support their learning and development is a key enabler of BGF's impact and is a critical priority.

Likewise, one of our strengths has been that our workforce has always been drawn from the communities that we serve. In the coming four years, we will continue to diversify our workforce so that it reflects the diversity of our clients and communities.

Strong and accountable leadership across both the executive leadership and the governance team has been a key enabler of the organisation's consolidation and growth. Continuing to strengthen and diversify our leadership and governance teams is a key priority for the next four years.

The capabilities and commitment of staff and leaders must be enabled by organisational systems and processes that support the work and facilitate planning, development and accountability. Continuing to strengthen these systems and processes will enable us to deliver on our strategic priorities.

Likewise, stabilising and diversifying our funding, including through the expansion of our Community Support Program to provide disability and aged care supports to a wider demographic and ensuring maximum benefit from strategic investment, is a key enabler of our impact.

To achieve these aims, we will:

3.1 Develop and implement a workforce philosophy targeting retention, learning and capability building, to ensure that our staff can meet the needs of our diverse client groups and best practice delivery and reflect the diversity of our clients and communities

3.2 Develop and implement a leadership development philosophy for the Board and management team, with a focus on skills, recruitment (including diversification to reflect BGF's communities and succession planning) and alignment on ownership of solutions, outcomes, vision and strategy

3.3 Maintain and strengthen effective systems and processes, including:

3.3.1 Maintaining an effective risk management framework, well governed by the Board

3.3.2 Adapting contemporary human resources practices and systems while maintaining the highest standards of compliance to meet the evolving needs of the organisation

3.3.3 Strengthening financial systems for decision making

3.4 Provide services to LGBTQIA+ and progressive ally community members with NDIS and aged care packages

3.5 Consolidate and diversify funding and maintain strategic investments to enable the work of the organisation, including:

3.5.1 Researching and identifying the most efficient and/or sustainable funding mechanisms

3.5.2 Developing and implementing a three-year private fundraising strategy

3.5.3 Maintaining current and exploring, new institutional funding opportunities through state and federal networking opportunities and stakeholder engagement

3.5.4 Maintaining effective stewardship of BGF's managed funds and completing reviews of fund management support as required

3.6 Maintain and strengthen our place as a trusted and respected organisation, through:

3.6.1 Board and executive-led network development and advocacy

3.6.2 Upholding BGF's core values

3.6.3 Creating a strong value proposition, with a focus on high-quality, locally relevant responses to the needs of diverse and equity-denied communities

3.6.4 Ensuring that our communications strategy communicates our values and mission

3.6.5 Continuing to operationalise our evaluation framework and using that data to inform organisational planning, development and continuous improvement

Monitoring and evaluation

BGF uses a range of strategies to monitor and evaluate our activities and impact. In the coming four years, we will measure progress against this plan through:

- Ongoing collection and review of activity data as required to provide quarterly and annual reporting to NSW Health against agreed upon KPIs
- Periodic surveys of clients to assess unmet need and client satisfaction via an annual Client Satisfaction Survey
- A rolling program of evaluation to assess the impact and outcome of our client services via Client Satisfaction Surveys, Client Reference Group and regular client caseload review (incorporating PozQol, individual care plans and goal achievement outcomes)
- Assessment of donor engagement and satisfaction via an annual Donor Satisfaction Survey
- Ongoing staff engagement surveys via an annual Employee Satisfaction and Engagement Survey
- Regular reports to funders against specific funded initiatives via relevant acquittals
- Bi-annual review of progress toward these goals by the Board.