

Quality improvement in Aboriginal primary health care: Lessons from the best to better the rest

Aim

To investigate contextual factors that contribute to the success of continuous quality improvement (CQI) strategies via a multi-site case study project of high-improving Aboriginal and Torres Strait Islander primary health care (PHC) centres.

Overview

Background: There is a strong and growing body of evidence that highlights the benefits of CQI systems and processes in improving the performance of individual Aboriginal and Torres Strait Islander PHCs over time. However, some PHCs do better than others and, by analysing a small sample of high-improving centres, this research aimed to identify success commonalities that can help improve CQI performance across all PHCs.

Project description: The Lessons from the Best project used case studies to investigate the ‘secrets of success’ of high-improving Aboriginal and Torres Strait Islander PHC services. Six services in far north Queensland, the Northern Territory and Western Australia’s Kimberley region took part in the research.

Project findings suggest that complex workforce, organisational and resourcing factors alongside the wider community context combine to influence the degree to which service quality improves in response to CQI cycles. There was no statistically significant association between quality improvement status over time and service size, governance models or remoteness, but there was a possible negative association with accreditation status.

Outputs to date

- + Three one-page summary documents – a policy brief, a summary for health services and the results of community feedback – developed and distributed to stakeholders.
- + The presentation of main research findings at the PHC Research Conference, Melbourne, August 2018; the NH&MRC Annual Symposium on Research Translation, Brisbane, November 2017; and the AMSANT CQI Collaborative, Alice Springs, November 2017.
- + Two published journal articles, another under review and one near submission.

Key messages

Even among this group of ‘high-improving’ services the ways in which CQI is conceived, implemented and communicated vary dramatically. Some themes were common at the health service level and at the community and interpersonal levels, but they were not universal. These themes included:

- + committed staff leadership (clinical and managerial)
- + strong partnerships within community and broader networks
- + embeddedness in Aboriginal and Torres Strait Islander culture.

Each level of the system has distinguishing interaction patterns (e.g. shared decision making or staff relationships) that support quality improvement, and high-improving services are responsive enough to modify their activities according to context to optimise quality improvement. For example, in jurisdictions with unsupportive policies it appears that impetus is gained through generating local solutions to overcoming challenges.

Factors influencing CQI at high-improving services operated at three levels:

- + Community and inter-personal level – local engagement with the service and caring staff.
- + Health service level – CQI supports, teamwork and collaboration, a prepared workforce and ‘two-way’ thinking that brought together Indigenous and non-Indigenous perspectives.
- + Broader contextual level – policies, linkages with external organisations, understanding and responding to historical and cultural contexts, and communities driving health improvement.

Next steps

The project team leveraged the findings and experiences from the project in a successful application to the NH&MRC for a partnership grant, ‘Quality improvement in Indigenous primary health care: Leveraging Effective Ambulatory Practices’ (LEAP) (see LEAP project description).

<i>Project team</i>	Sarah Larkins (Team Leader) ¹ , Sandy Thompson ² , Jacinta Elston ¹ , Christine Connors ³ , Komla Tsey ¹ , Ross Bailie ⁴ , Cindy Woods ¹ , Annette Panzera ¹ , Nalita Turner ¹ , Michelle MacLaren-Redman ¹ , Karen Carlisle ¹ , Judy Taylor ¹ , Ru Kwedza ⁵ , Roderick Wright ⁶ , Kerry Copley ⁷ , Tania Patrao ⁸ , Veronica Matthews ⁴ , Jacki Ward ⁹
---------------------	---

<i>Project status</i>	Completed
-----------------------	-----------

<i>Dates</i>	2014 – 2016
--------------	-------------

<i>Further information</i>	Professor Sarah Larkins T +61 7 4781 3139 E sarah.larkins@jcu.edu.au
----------------------------	--

- 1 James Cook University
- 2 University of Western Australia Centre for Rural Health
- 3 Northern Territory Department of Health
- 4 University Centre for Rural Health (University of Sydney)
- 5 NSW Health
- 6 Queensland Aboriginal and Islander Health Council
- 7 Aboriginal Medical Services Alliance NT (AMSANT)
- 8 University of Queensland
- 9 Midwest Primary Health Network