



# Impact evaluation of a strengths-based approach to improving the delivery of Indigenous primary healthcare by learning from high improving centres

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In the spirit of respect, the CRE-IQI acknowledges the people and the Elders of the Aboriginal and Torres Strait Islander Nations who are the Traditional Custodians of the land and seas of Australia.

The Centre for Research Excellence in Integrated Quality Improvement is a collaboration between research organisations, universities, service and policy organisations, managers and service providers.



# Background

**175** health centres

38 community controlled

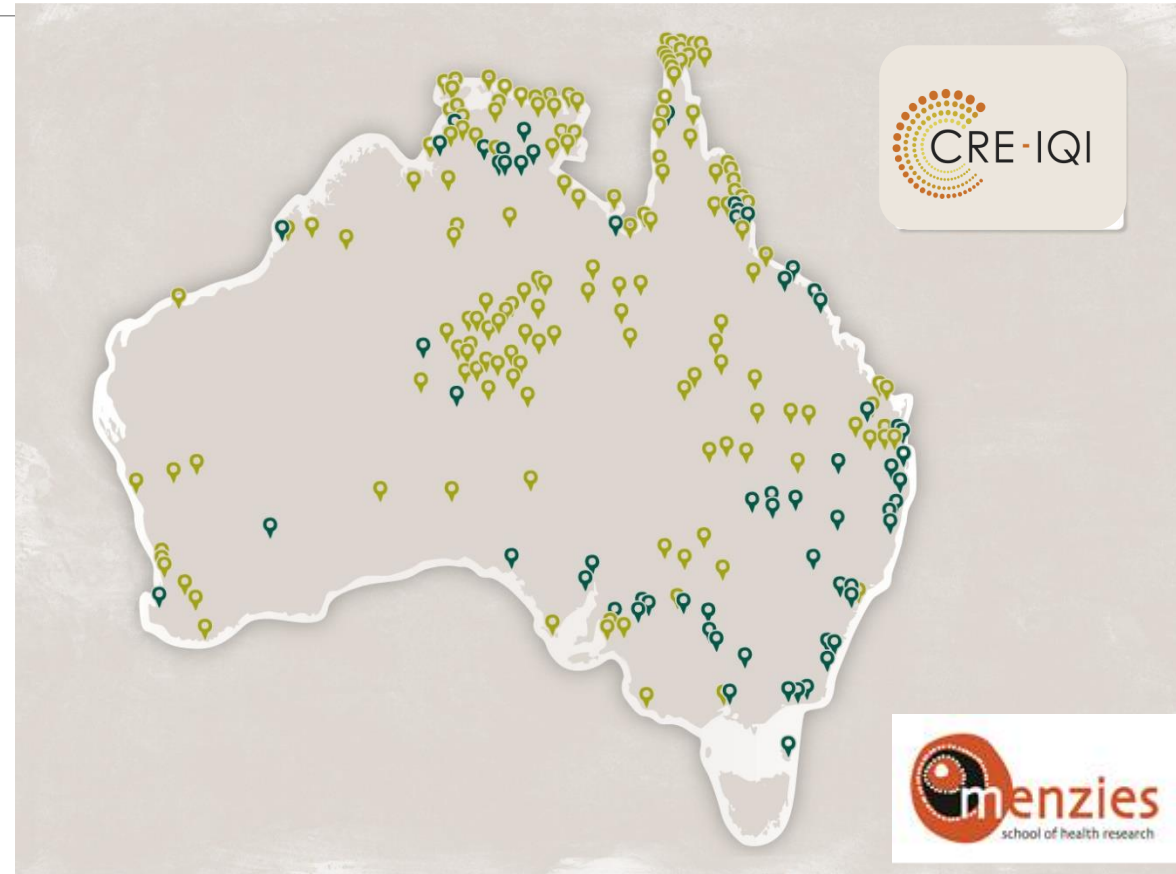
137 government, other

10 years data collected

60,000 audited patient records

492 system assessments

Continuous quality improvement data



# Background

## Continuous quality improvement data

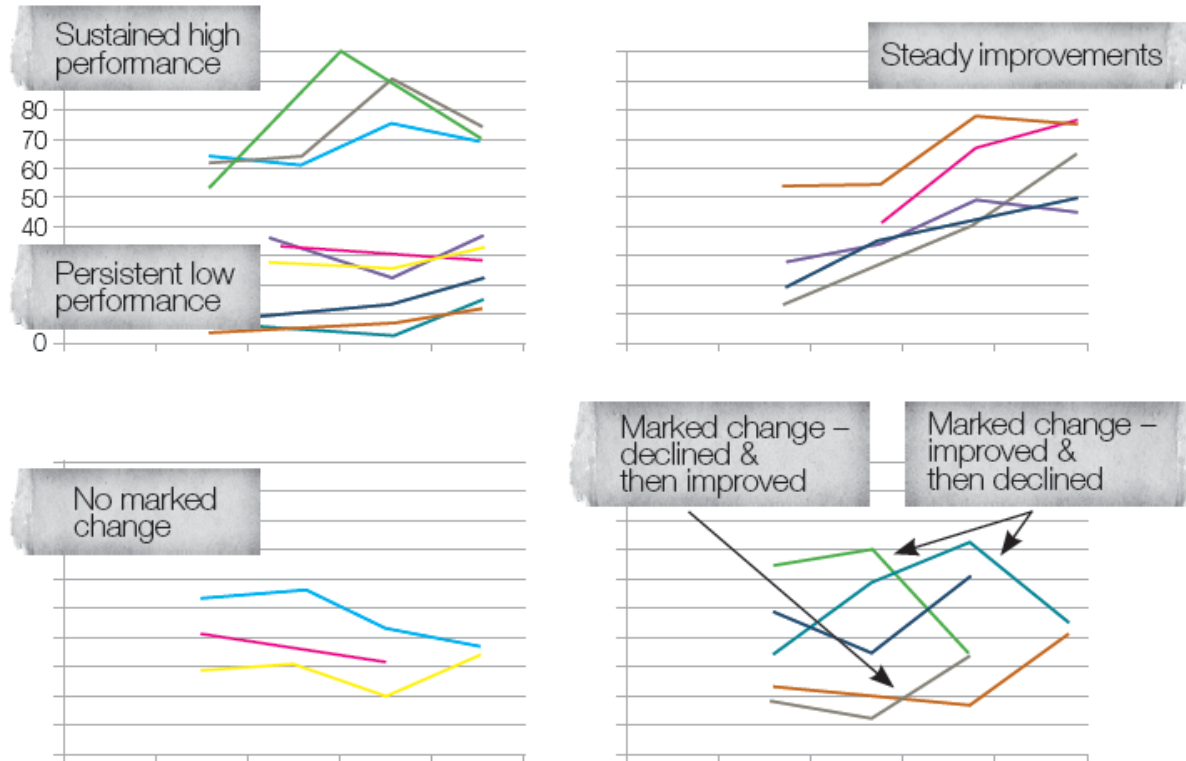


Figure 6: Select examples of trends in overall delivery of preventative services – illustrative health centres

# Project summary: Lessons from the Best (2014-2016)



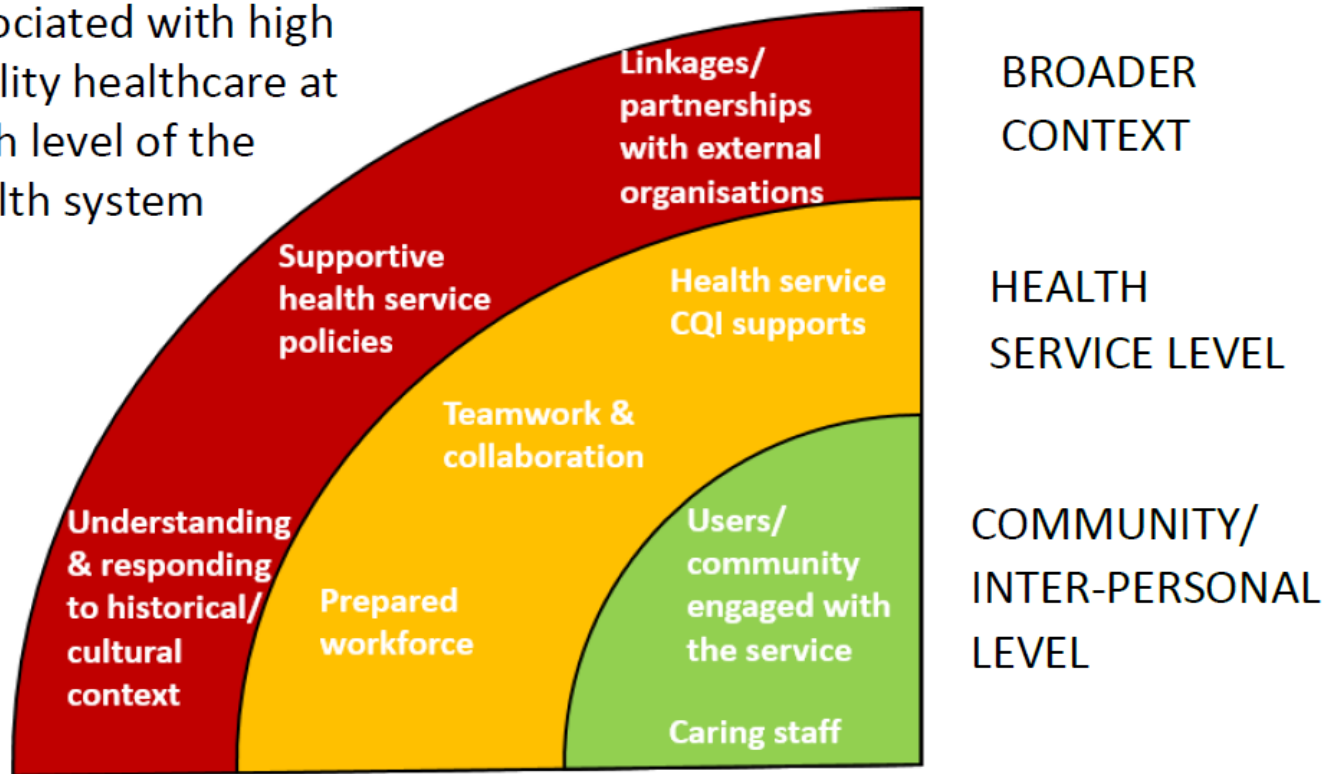
The effectiveness of CQI initiatives varies considerably between Indigenous primary healthcare centres.

Lessons aimed to improve the quality of Indigenous PHC services, through examination of six "high improving" PHC centres. NT (n=3) QLD(n=2) WA (n=1)

Learnings used to assist Indigenous communities, policymakers and services that are striving to improve their systems and services

# Project summary – Lessons from the Best (LFTB)

Fig1: Themes associated with high quality healthcare at each level of the health system







## AIMS OF STUDY

- To assess the impact of the Lessons Project
- Report on the results of the impact assessment

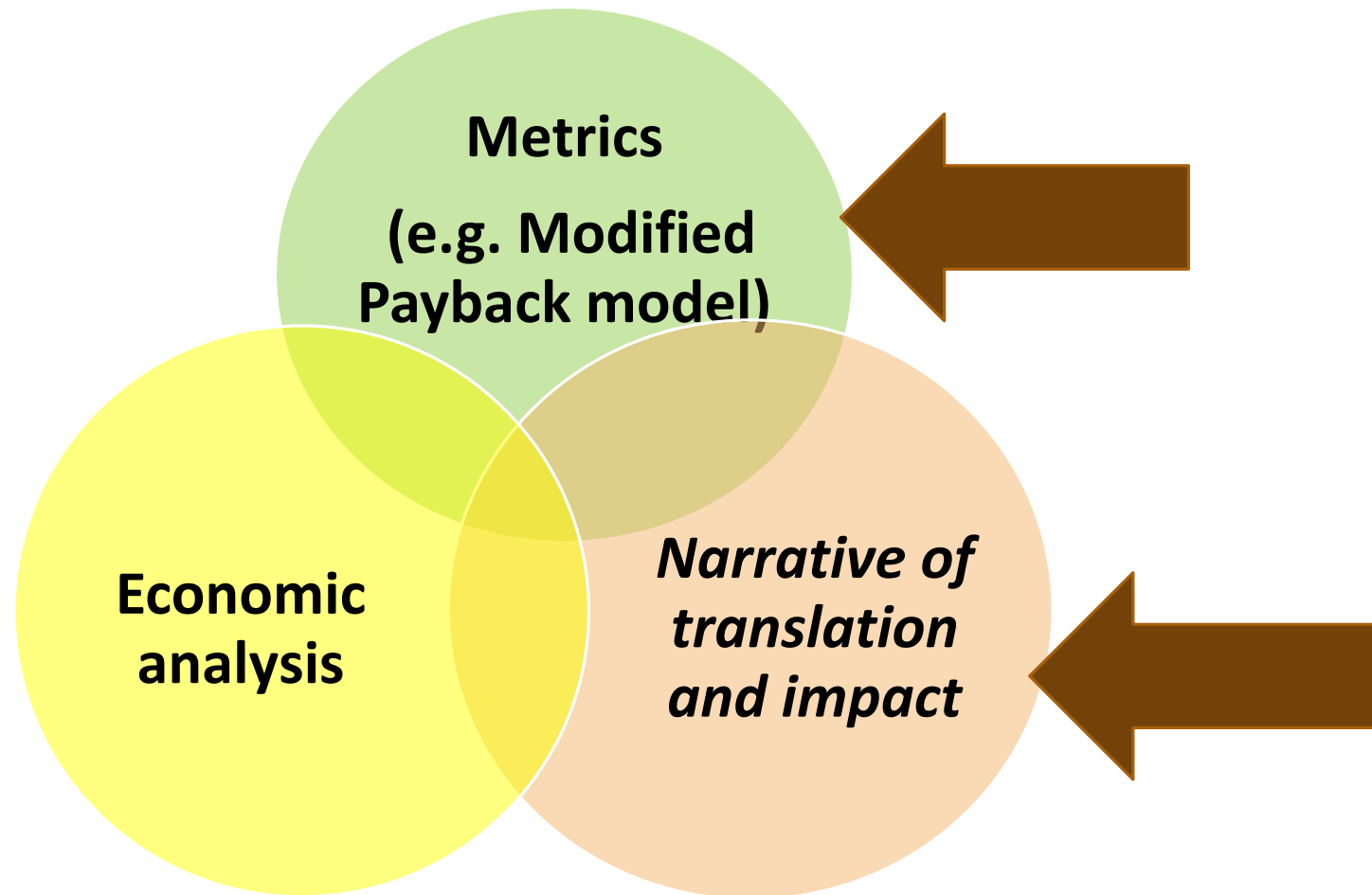
# Research impact

"Research impact is the demonstrable contribution that research makes to the society, economy, environment and culture beyond the contribution to academic research"

(Australian Research Council, 2017)



# Framework to Assess the Impact of Translational Health Research (FAIT)



# Domains of benefit (FAIT)



# Domains of benefit (FAIT)



# Advancing knowledge

Metric	LFTB indicator
Published articles (2017 & 2018)	2 (5,547 views, 2,507 downloads) 100% open access
Citations Google citations	14 (peer reviewed publications) 25
Conference presentations	8 (2 international)
Posters	2 (1 international)
Project briefs (services, policy, Indigenous community)	3
Final reports to services	6

# Reach of knowledge

Exploring Systems That Support Good Clinical Care in Indigenous Primary Health-care Services: A Retrosp...



# Building/strengthening capacity

Metric	LFTB indicator
No. of Indigenous researchers involved	5 (LFTB) 7 (LEAP)
No. of health services involved	6 (LFTB) 8 (LEAP)
No. of health service staff involved	55
No. of health service visits/newsletters	20/6
Masterclasses and capacity building teleconference	1 each (31 & 19)
No. of community members involved	51
No. of ACCHO representatives on management committee	2



# Building capacity/engagement

*“The professional development – talking to researchers and other services about what they do around quality because we are quite insulated in our own service – getting new ideas.”*

*Service Manager 1*

*“Once you’ve participated in a process and moved forward – what was done becomes part of the foundation of what goes on. So I’m totally confident that it contributed to our ability now to pass our ISO accreditation, to maintain our AGPAL accreditation, and inform our current CQI activities.”*

*Service Manager 2*

*“Often we are just researched and don’t really participate in the development of the research. There’s always good intentions... but timeframes get tight and we just get a paper with the findings. This was very different– we were really engaged in it right from the start.”* Clinician Manager

# Strengthening the health system

*“The research that you guys did and the evaluation is probably the more beneficial stuff...we want research that’s going to benefit our communities in the medium to short-term. What I’m saying is the benefits have become entrenched in the organisation and has benefitted how we deliver services to the community and ultimately how we have structured ourselves to provide these services.”*

*Clinician manager*

# Strengthening the health system

*“One of the really big benefits was we got some money for our involvement and time and we got more emergency gear and equipment to examine skin and a few other things we wanted for a long time but couldn’t afford so that was brilliant.”*

Service Manager 2

# The Leveraging Effective Ambulatory Practices project (2017-2020)

- **Working with striving services** who are engaged in CQI but failing to achieve their QI goals
- Creating a **learning community**
- Identifying challenges implementing CQI
- **Collaboratively assembling a toolkit** of customisable tools and processes to address challenges
- Rigorously assessing the effectiveness, impact and acceptability of the intervention (**evaluation**)

# Summary of findings

## LFTB had impacts in the following domains:

- **Advanced knowledge** amongst research community, health providers, policymakers and the Indigenous community
- **Built research capacity** amongst Indigenous researchers
- **Built CQI and research capacity** amongst health service staff
- **Strengthened the health system** by embedding CQI and providing resources for health centre needs
- **Supporting striving services** to achieve their CQI goals
- **Building a learning community**



## THANK YOU

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