New resources to strengthen the quality of Indigenous health services

Monday, 17 March 2014

A Continuous Quality Improvement (CQI) tool designed specifically for Aboriginal and Torres Strait Islander youth aged between 12 - 25 years has been launched by the Menzies School of Health Research (Menzies).

The burden of disease and the health needs of Indigenous youth people differ from children and adults as adolescence is a unique developmental period.

Indigenous young people are often ‘infrequent attendees’ of health services presenting only for health care at more serious stages of illness where their needs and wellbeing are sometimes overlooked.

Menzies’ senior principal research fellow, Professor Ross Bailie said the CQI tool is an important auditing tool as it is designed to assess the health care provided to Indigenous youth and will provide an indication of whether clients are ‘falling through gaps’.

“The youth health clinical audit tool was developed in response to sector demand to enable health services and clinicians to systematically assess the quality and delivery of healthcare provided to youth,” he said.

The tool is based on national and state/territory guidelines for Aboriginal and Torres Strait Islander healthcare and has been tested in urban, regional and remote sites in government and community-controlled health centres across four states and territories.

The youth health clinical audit tool collects data from health service records which is then analysed against best practice guidelines. Service providers are then provided with web-based reviews of their strengths and weaknesses.

CEO of the Lowitja Institute, Lyn Brodie said she was looking forward to hearing of the tool’s outcomes.

“We’re very excited to have been able to support the development of these wonderful new resources,” she said.

“The health and wellbeing of young Aboriginal and Torres Strait Islanders is critical to closing the gap. Resources and tools like these when supported by consistent implementation ensures evidence translate into practice.”

The youth health clinical audit tool was developed in 2013 by Menzies with the support of beyondblue and the Lowitja Institute. The youth health tool is the latest addition to the One21seventy suite of resources to support best practice primary healthcare for Aboriginal and Torres Strait Islander people, and complement the CQI tools already available.

Responding to an increased demand for workforce development, One21seventy has also launched a suite of eLearning modules. The modules offer self-paced online learning activities that can be accessed across Australia. Funding support for these innovations has been provided by the Lowitja Institute.

The youth health clinical audit tool and eLearning modules are available through the not-for-profit One21seventy National Centre for Quality Improvement in Indigenous Primary Health Care. The
tools were unveiled at the Lowitja Institute National Conference on Continuous Quality Improvement (CQI) in Aboriginal and Torres Strait Islander Primary Health Care in Melbourne today, Monday 17 March 2014.

For more information on the youth health clinical audit tool and eLearning modules visit www.one21seventy.org.au

Media note:
Interviews are available with Ross Bailie. Professor Bailie is the Scientific Director of the Centre for Primary Health Care Systems and leads the NHRMC funded ABCD National Research Partnership on quality improvement in Indigenous primary health care. He is also involved in research on food supply and environmental health and housing in Aboriginal and Torres Strait Islander communities.

Media Contact:
Emily O’Connell, Executive Officer 0422 185 409

Background
One21seventy is a not-for-profit organisation set up through the Menzies School of Health Research and the Lowitja Institute to provide ongoing support and training for primary health care services to implement evidence based continuous quality improvement processes. One21seventy is the National Centre for Quality Improvement in Indigenous Primary Health Care. Its aspiration is to increase the life expectancy for Indigenous people – beyond one in infancy, beyond 21 in children and young adults and beyond seventy in the overall lifespan.