Quality Improvement in Indigenous Primary Health Care

Project 104: ABCD (Audit and Best Practice in Chronic Disease)

What’s the project about?

This continuous quality improvement (CQI) project aims to improve health outcomes by assisting Indigenous primary health care centres to improve their systems for delivery of best practice care. Focused initially on chronic disease, the 12 original participating health care centres in the Top End achieved significant improvements in quality of care and diabetes outcomes for clients. The current extension phase of the project is targeting a wider range of primary health care priorities and incorporating the ABCD approach into routine practice. Project staff work with health centre staff to identify strengths and weaknesses in their systems, set goals for improvement, develop strategies to achieve these goals, and then assess the effectiveness of these strategies.

Who’s involved?

- Menzies School of Health Research
- Northern Territory Department of Health and Community Services
- Office of Aboriginal and Torres Strait Islander Health
- More than 50 Indigenous primary health care centres across NT, WA, NSW and north Queensland
- CRC for Aboriginal Health

Outcomes

- There are now more than 50 Indigenous primary health care centres from four states/territories—NT, WA, NSW and north Queensland—formally enrolled in the project. Regional support hubs have been established in these states/territories.
- The project tools are being used in many other Indigenous and non-Indigenous settings across Australia, with interest in using the tools coming from Canada, Fiji and South Africa.
- The project has resulted in improvements in:
  - health centre systems (such as clarification of roles and responsibilities for chronic illness care)
  - delivery of services according to best practice guidelines (such as more regular monitoring of blood pressure and blood glucose)
  - intermediate health outcomes (such as better control of blood glucose and cholesterol).
Implications of findings for policy and practice

Long-term research/service/policy partnerships, such as the one established through the CRC for Aboriginal Health, have been critical to the success of the ABCD Project. They were important in developing appropriate quality improvement (QI) processes and tools, achieving engagement of Indigenous primary care services and in demonstrating the benefit of a national resource to support development and implementation of QI systems. There is a need for national resources to coordinate these functions, and QI initiatives in Indigenous primary health care more broadly. The ABCD Project provides a solid foundation for such a resource.

The core current and future requirements are for:
- expansion of the facilitation support network for health centres
- maintaining the operation of the web-based information system
- development of additional tools for priority aspects of care; and
- continuing R&D to expand the evidence base for both CQI processes in this setting and the outcomes achieved.

The original ABCD project ran from 2002 to 2006. The extension project commenced in 2005 and runs through to the end of 2009.

Improved service delivery in western NSW

The ABCD approach has been enthusiastically supported by Indigenous primary health care services across Australia. Richard Weston, regional director of Maari Ma Health Aboriginal Corporation in western NSW, says the ABCD methodology has shown ‘an improvement in the percentage of scheduled services delivered to well adults and those with diabetes in the Remote Cluster’.

The most recent Maari Ma results show an improvement in delivery of scheduled services for well adults from 24% in 2005 to 39% in 2006, and for diabetic clients from 51% in 2005 to 58% in 2006.

Richard says: ‘Maari Ma Health and our Board believes that the excellent research and evidence-based work that underpins the ABCD project is making a significant contribution to Aboriginal health.’

To find out more
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