More than just data: Challenges in quality primary healthcare for Indigenous youth

The ‘Y Health – Staying Deadly’ and Youth Health Audit projects are two action research collaborations between researchers, health services and policymakers with a focus on quality in health care for Indigenous youth (12-25 years). The “Y Health” team is developing and implementing an evidenced based Youth Health Check (YHC), and collaborating with the ABCD Research Partnership, who are leading the development of a Youth Audit Tool.

Why Y Health?
Young people (including Aboriginal youth) have specific health needs that are different to the needs of children and adults. Mental health, sexual health and alcohol and other drug problems are the leading health concerns for Indigenous young people (AIHW 2011). Young people tend not to access and utilise health services. In addition, although there may be well established youth service providers/organisations, there is not always a clear and coordinated service delivery model for Aboriginal youth.

‘Y Health – Staying Deadly’
This is a collaborative project between Primary Care researchers working in Aboriginal Health Services in Adelaide and NSW, funded by the Australian Primary Health Care Research Institute. Using a Community Based Participatory Action Research approach, and informally partnering with other youth health providers (NT Health, SA Youth Health Services, and the ABCD National Research Partnership, the project aims to develop and embed an evidence based Aboriginal Youth Health Check within a Continuous Quality Improvement (CQI) cycle. The Health Check will be used as a basis for a planned step-wise design for service delivery with community involvement and strategic use of existing resources.

Y Health - Project Aims
- To develop & implement an evidenced based YHC for Aboriginal young people aged 12-24 years
- To enable better health screening leading to appropriate referral & management
- To increase young people’s health literacy
- To raise the confidence of young people to engage with their own health
- To support Aboriginal health workers to conduct Youth Health Checks
- To create a youth friendly, culturally safe & integrated model of service delivery
- To develop research capacity within an Aboriginal primary care organisation
- To contribute to the development of a Youth Audit Tool that will measure the delivery of the YHC

A Psychosocial Framework
Recognising that youth health problems are largely psychosocial in origin, the YHC will be underpinned by an indepth psychosocial screening. This enables a systematic gathering of information about young peoples’ lives, performing risk assessment and screening and identifying potential protective factors and areas for intervention. The Youth Health Audit Tool will therefore also incorporate psychosocial screening as a QI measure.
Youth Health Audit – Project Aims
We aim to improve the quality of health and wellbeing services for Indigenous youth by:

- Improving the delivery of evidence-based guideline-specified services for Indigenous people aged 12 – 25 by developing and piloting a clinical audit tool
- Improving the attendance of Indigenous people aged 12 – 25 at health centres using an existing systems assessment tool
- Engaging health service staff in a pilot quality improvement cycle for Indigenous youth health, with an emphasis on Aboriginal Health Workers’ role in quality improvement
- Facilitating implementation of the youth health quality improvement cycle in routine health service practice through web-based reporting, technical assistance, regional comparisons and training for health services
- Facilitating future data collection for further research into Indigenous youth health including an evaluation of the Aboriginal Youth Health Check

One21seventy Quality Improvement Cycle
The One21seventy continuous quality improvement cycle, developed by the Audit and Best Practice for Chronic Disease (ABCD) project, is designed to assist Indigenous primary healthcare centres to better understand the quality of their health services and improve health outcomes. Step 3 is the data collection phase that utilises clinical audit tools to provide data on health centre performance.

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Youth Health Audit Tool Project: The Lowitja Institute; NHMRC Partnerships Projects (ID No. 545267); the Youth Health Audit Tool Reference Group; NT Department of Health; One21seventy.

References