About the Lowitja Institute

The Lowitja Institute is the only research organisation in Australia with a sole focus on the health and wellbeing of Australia's First Peoples. The voice of Aboriginal and Torres Strait Islander people informs all our activities, whether we're conducting community-based research or setting our strategic direction.

Named in honour of our **Patron, Dr Lowitja O'Donoghue AC CBE DSG**, our organisation works under the direction of a skills-based Board made up of a majority of Aboriginal and Torres Strait Islander members and led by an independent

Aboriginal Chairperson. The principle of **strong Aboriginal and Torres Strait Islander leadership** at all levels of research and innovation is central to our identity.

We are committed to maintaining the **traditions** of research excellence and collaborative endeavour established over many years by our two predecessor Cooperative Research Centres (1997–2009). The Institute, launched in 2010, currently hosts the CRC for Aboriginal and Torres Strait Islander Health (CRCATSIH) through to June 2014.

Implementing and Communicating our Research

We have developed a research program that promotes **high-quality research** through increased Aboriginal and Torres Strait Islander control of the research agenda and our key partnerships. We are also fostering a new generation of Aboriginal and Torres Strait Islander health researchers through our scholarship program and our focus on capacity development.

Partnerships are our strength. By bringing together Aboriginal and Torres Strait Islander people with world-leading researchers, policy makers and experts in cutting-edge service delivery, the Institute fosters the kind of collaborative research that is making a real difference to the health and wellbeing of Australia's First Peoples. At every stage of our research, we work with Aboriginal and Torres Strait Islander people and communities to set

priorities, refine the research and ensure that findings are put into practice.

This approach has earned us a reputation as leaders in knowledge exchange. For us this is a two-way process between Aboriginal and Torres Strait Islander people, researchers and the end-users of research, in which research can be used to influence policy and planning, as well as practice and systems.

Our research, now spanning more than 15 years, provides many examples of our track record of best practice in knowledge exchange. Overleaf we have set out one such knowledge exchange case study, mapping its journey from research concept through to implementing and communicating the findings of that research. For others, visit our website at: www.lowitja.org.au/case-stories-researchers.

Our Vision

To achieve equity in health outcomes for Aboriginal and Torres Strait Islander peoples.

Our Dreaming

As the National Institute for Aboriginal and Torres Strait Islander Health Research, with a sole focus on the health and wellbeing of Australia's First Peoples, we will:

- Ensure that Aboriginal and Torres Strait Islander peoples have a strong voice in all activities
- Bring together Aboriginal and Torres Strait Islander communities, health services, researchers, governments and policy makers to enable high-quality, collaborative health research that makes a difference
- Continue to develop world-leading Aboriginal and Torres Strait Islander health researchers
- Build on our record as national leaders in knowledge exchange and the translation of research findings into evidence-based practice and policy
- Work at the community, regional and national levels to improve health outcomes and set the research agenda
- Work with our extensive networks to be the pre-eminent source of evidence and expertise in Aboriginal and Torres Strait Islander health research.

Contact Us

Melbourne (Head Office)

179 Grattan Street | Carlton | Vic. 3053 PO Box 650 | Carlton South | Vic. 3053 t: +61 3 8341 5555 f: +61 3 8341 5599 e: admin@lowitja.org.au Our regional offices are in Darwin, Adelaide and Brisbane. For more information about the Lowitja Institute, go to:

www.lowitja.org.au



Incorporating the Cooperative Research Centre for Aboriginal and Torres Strait Islander Health







Aboriginal [and Torres Strait Islander] individuals and organisations must be fully involved — not just consulted — in the initiation, design and implementation of the research the Lowitja Institute undertakes... The Institute must disseminate its research findings widely — not just to other researchers, but to health practitioners, the corporate sector, governments, politicians of all persuasions, and to the public.

Dr Lowitja O'Donoghue AC CBE DSG

The Lowitja Institute launch | February 2010

Improving the culture of hospitals for Aboriginal and Torres Strait Islander people

Australia's institutional providers of health care, such as hospitals and GP clinics, can be unfamiliar and even threatening environments for Aboriginal and Torres Strait Islander people.

This perception can act as a barrier to their uptake of health services and have adverse health consequences. Thus, the CRC for Aboriginal Health (CRCAH) and now the Lowitja Institute have strongly supported research focused on encouraging health institutions to become more receptive and responsive to, and culturally safe for, Aboriginal and Torres Strait Islander people using their services and facilities.

The aim of Improving the Culture of Hospitals Project (ICHP) is to examine successful Aboriginal and Torres Strait Islander programs conducted by hospitals within a quality improvement framework, then use the information to explore what would support replicating and sustaining these programs across a wide range of hospital environments.



for Aboriginal and Torres Strait Islander Health







2002

Victorian study establishes need for reform

The Victorian Department of Human Services releases the Aboriginal and Torres Strait Islander Accreditation Report, a detailed analysis of the need for accurate data on Indigenous status and the connection this has with continuous quality improvement (CQI) in the hospital context. This link between data accuracy and status disclosure leads to the need to develop culturally safe services, which is closely aligned with the strength of relationships between health services and Aboriginal organisations and communities. The study's lead authors, Associate Professors Russell Renhard and Ian Anderson, suggest the best way to achieve this is by implementing an explicit accountability framework complemented by data collection and analysis.



Main research study period

Project activity takes place in six phases. Phases 1–3 involve consultation with Aboriginal and Torres Strait Islander peak health organisations and mainstream health providers, a review of operating contexts within hospitals and the establishment of case studies within the following five hospitals: St Vincent's (Melbourne), Royal Adelaide Hospital, Goulburn Valley Health (Shepparton, Vic.), Maitland Hospital (Yorke Peninsula, SA) and Royal Children's Hospital (Melbourne). Phases 4–6 involve the testing of interventions – culturally sensitive CQI tools and processes – on location. Chief among these is the Aboriginal Quality Improvement Toolkit for Hospital Staff, which includes a quality framework that uses a CQI 'Plan, Do Study, Act' cycle with some extra steps added in to ensure ongoing engagement with the local Aboriginal and Torres Strait Islander community.

2011 to 2014

More hospitals sign up for culture change

The ICHP team expands its work through two new projects: the Improving Pathways to Hospital Care Project, funded by Victoria's Department of Health North Western Metropolitan Region to implement the Aboriginal Quality Improvement Framework and Toolkit in two Victorian hospitals; and the Aboriginal Identification in Hospitals Quality Improvement Project, funded by the NSW Department of Health to implement and evaluate the Aboriginal Quality Improvement Framework and Toolkit in eight NSW hospitals. Meanwhile improvements continue at the four original implementation hospitals, with findings shared directly with other jurisdictions.

The key findings

The case study results indicate that hospitals considered to be successfully addressing the issues of their Aboriginal and Torres Strait Islander patients share the following characteristics:

- Strong partnerships with Aboriginal communities
- Enabling State and Federal policy environments
- Leadership by hospital boards, CEO/ general manager and key clinical staff
- Strategic policies within their hospitals
- Structural and resource supports
- A commitment to supporting the Aboriginal and Torres Strait Islander workforce.

March to June 2006

Improving the Culture of Hospitals Project approved

The ICHP is among the first four projects to be approved under the CRCAH's new Facilitated Development Approach for project development. Using the experience of Aboriginal people as its central reference point, the project team (led by A/Professor Renhard and Mr John Willis from La Trobe University) designs a series of systematic case studies of hospitals with different levels of expertise in engaging with Aboriginal patients. The objective was to produce a quality improvement framework with tools and processes that assist hospitals to engage with their local Aboriginal communities, and to equip Aboriginal Liaison Officers via training to enable them to take part in improving participating hospitals' cultural sensitivity. Other project partners include the Aboriginal Health Council of South Australia (Mr Alwin Chong) and Onemda VicHealth Koori Health Unit (Ms Angela Clarke) at the University of Melbourne (A/Professor Gai Wilson) The Victorian Aboriginal Community Controlled Health Organisation receives funding to develop and deliver the training.

2009 to 2010

Key consultations and outcomes

The CRCAH commissions two Roundtable meetings during 2009. The first brings together key stakeholders from government and hospitals to discuss the findings from the ICHP program and determine the next steps. The second involves representatives from the Australian Council of Healthcare Standards to workshop additional Aboriginal-specific elements to the Evaluation Quality Improvement Program (EQUiP5). This meeting results in three Aboriginal-specific elements being added to EQUiP5 in 2010 with the Aboriginal Quality Improvement Toolkit for Hospital Staff added as a referenced resource. ICHP reforms are implemented at Derby (WA), Campbelltown (NSW), Royal Brisbane and Women's (Qld) and Mater (Qld) hospitals. The ICHP finishes in 2010 with the publication of a final project report and the development of an online toolkit, located on Melbourne's St Vincent's Hospital website (www.svhm.org.au/aboutus/community/ICHPtoolkit).

