



# Comprehensive Primary Health Care, Health Systems and Workforce Program

## Program Goal:

**To improve the performance of health systems, with a particular focus on comprehensive primary healthcare services in order to maximise health gains for Aboriginal people.**

## Program Overview

Despite improvements in some areas, progress in reducing the gap and improving the health of Aboriginal and Torres Strait Islander populations continues to be in stark contrast to the gains made in Indigenous health in other countries. The Comprehensive Primary Health Care, Health Systems and Workforce Program takes a health systems approach to health improvement, centring on comprehensive primary health care and including relationships within and between the mainstream and the Aboriginal community controlled health sectors as well as the primary, secondary and tertiary sectors of health care.

The term comprehensive primary health care is used to refer to primary medical care for the individual, plus a more holistic approach that includes prevention and health promotion,

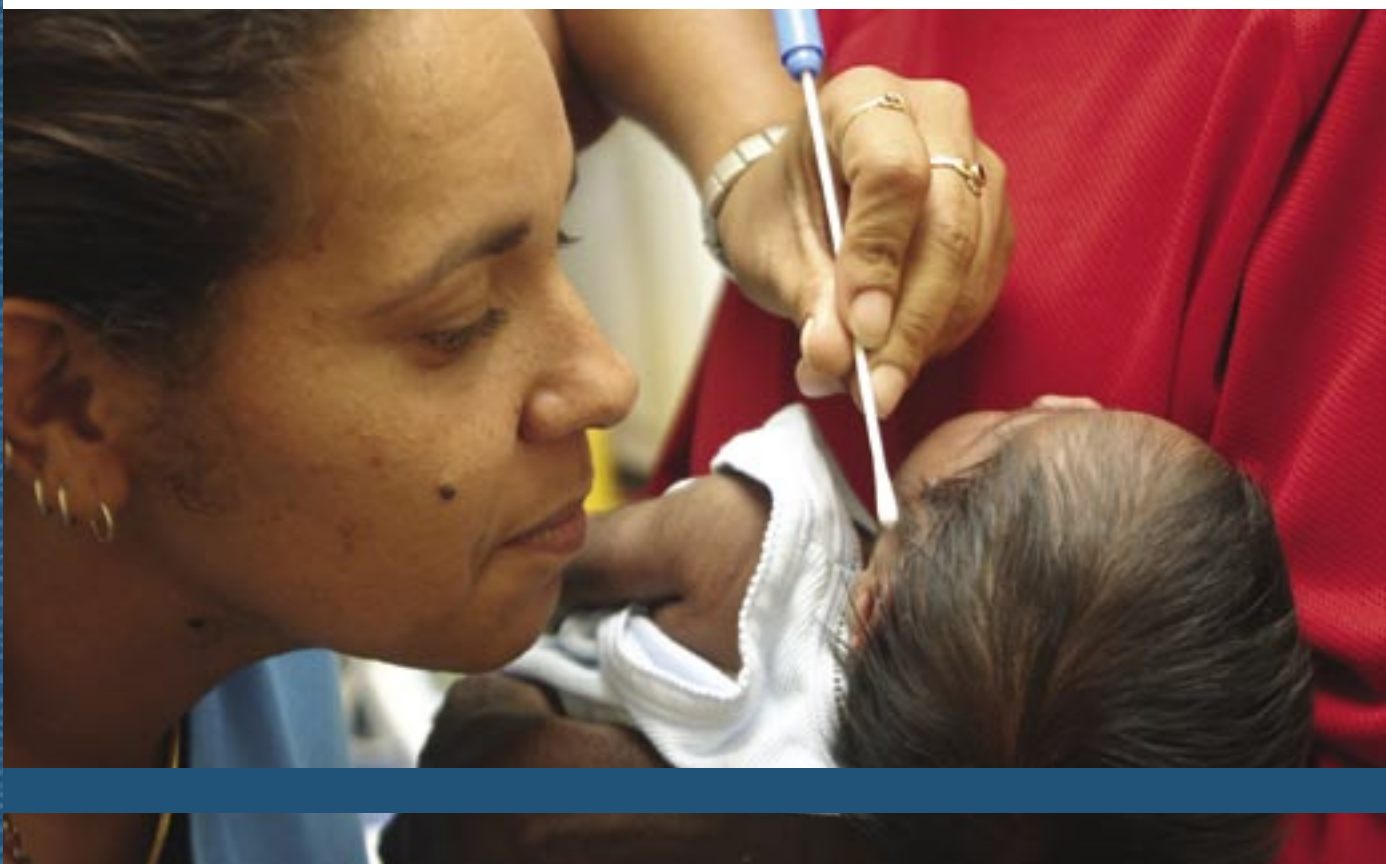
social and emotional wellbeing, and factors outside the health service such as education.

## Research Priorities

Extensive consultation with key stakeholders (from policy, research and the Aboriginal health sector) identified the following research gaps in this program area:

- comparative work that examines the effectiveness and efficiency of health service models and particularly the impact of different models on health improvement;
- analysis of Aboriginal comprehensive primary health care in the context of broader, multi-faceted health and intersectoral systems (including general practice);

- effective strategies for implementing evidence-based policy and practice (how to bring about change) in the health system, health services and the workforce;
- the identification of, and strategies for, implementing sustainable workforce models in Aboriginal comprehensive primary health care which recognise the value of Indigenous knowledge and practices; and
- the increased capacity both of the Aboriginal comprehensive primary health care sector and of Aboriginal researchers, particularly in management, leadership and governance.





## Major Areas of Work

The main work within this program is about structural components of comprehensive primary health care such as governance and management, funding and accountability, workforce models, corporate support, and quality improvement processes.

Four priority research projects have been commissioned within the program by the CRC for Aboriginal Health. A further 55 projects (both research and courses) have been endorsed as having potential to contribute to the research priorities and associated research focus areas (see table).

## Priority Research Projects

### 1. Best practice in funding and regulation of Aboriginal and Torres Strait Islander healthcare project

Project Leader: Judith Dwyer (Flinders University)

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Primary Health Care (PHC) funding is intended to improve the health of Aboriginal and Torres Strait Islander peoples by supporting good health care, while also meeting the need for accountability to communities and to government. Another important goal is making it possible for PHC providers to recruit skilled staff. However, the current funding arrangements are not working as well as they could, and providers often complain about too many different funding programs, requiring too many reports, with too many strings attached. Government staff also experience problems with administering these funds.

This project aims to find better ways of funding and regulating PHC for Indigenous communities from the perspective of both PHC provider organisations and government agencies. In this project, the terms funding and regulation are used to mean the size and shape of the funding that PHC providers receive from all sources, the conditions of funding, the reporting requirements and accountability

measures, and how providers and funders relate to each other.

### 2. Support systems for Aboriginal and Torres Strait Islander primary healthcare services project

Project Leader: Ian Anderson (The University of Melbourne)

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This project aims to identify the support needs (including that required to promote internal capacity) of Aboriginal Community Controlled Health Organisations (ACCHOs) as corporate entities, and to describe effective external support systems/frameworks. It complements the work of the CRCAH Quality and Standards in Aboriginal and Torres Strait Islander Health Project (Quality & Standards Project), which focuses on the potential support needs of those organisations funded by the Office for Aboriginal and Torres Strait Islander Health (OATSIH) in relation to achieving and maintaining accreditation.

The project results have potential to increase the viability and capacity of Aboriginal primary health care services by optimising their corporate functioning and, as a result, their capacity to provide the high-quality comprehensive primary health care required for improvements in Aboriginal health to be realised. Taking into account the differential organisational capacity and contexts of organisations, the project will provide information about:

- the nature (scope and characteristics) of corporate support needs;
- the external support systems/frameworks available, how these are accessed and how adequate they are;
- the external support structures/frameworks required for the provision of adequate support; and
- a feasible design for a subsequent action research study to pilot and/or evaluate the potential frameworks of organised support (this will depend on the outcomes

of a Quality & Standards Project being done in conjunction with OATSIH).

### 3. Improving the culture of hospitals [for Aboriginal and Torres Strait Islander people] project

Project Leader: Russell Renhard (La Trobe University)

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Lack of cultural sensitivity has limited the effectiveness of hospitals as a health resource for Aboriginal and Torres Strait Islander people. This project aims to support a program of cultural reform to improve cultural sensitivity in hospitals by contributing to the development of relevant quality assurance and improvement tools and processes.

Using the experience of Aboriginal people as the central reference point, the objectives of the project are to:

- Develop a comprehensive understanding of the characteristics that Aboriginal and Torres Strait Islander people believe would make hospitals more culturally appropriate.
- Document what tools are currently being used in hospital settings to ensure quality assurance/improvement in cultural sensitivity.
- Trial how these tools can be developed to address concerns and improve processes relevant to the needs both of hospital staff and of Aboriginal and Torres Strait Islander patients.
- Document what processes exist, or can be developed, that will effectively guide hospitals and Aboriginal and Torres Strait Islander communities to work collaboratively using continuous improvement methods to enhance hospital culture in regard to services provided to Aboriginal people.

Data will be collected through three waves of systematic case studies of hospitals with different levels of experience in making their services and surrounds more culturally sensitive to the needs of Aboriginal patients, their families and friends.

The aim is to produce tools and assess implementation processes that assist hospitals to engage with local Aboriginal communities in a collaborative exercise using information gained through the case studies. The first wave of case studies will be exploratory, while the second and third will involve the testing of an intervention—the trialling of culturally sensitive continuous quality improvement tools and processes. The 'organisational readiness for change' concept will be used to assist with understanding how best to introduce the tools and processes in different acute settings.

#### 4. Health services utilisation and linkage [for Aboriginal and Torres Strait Islander people] project— Stage 1

Project Leaders: Michael Bentley (Flinders University), Rae Walker (La Trobe University), Bronwyn Fredericks (Queensland Aboriginal and Islander Health Council)

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There is limited information about how to research appropriately the health needs of Aboriginal and Islander people living in urban and/or fringe (peri-urban) locations, and a lack of agreement as to the most appropriate and relevant methods for gaining this type of information from Aboriginal and Islander people. This project will address this research methodology gap by supporting developmental work in this area.

The project aims to facilitate consultations and increased understanding and agreement of how to approach research into patterns of service utilisation (or non-utilisation) by Aboriginal and Islander people in urban and peri-urban locations in ways that are both effective and culturally safe; The results of the project have the potential to contribute to the development of future, population-based research in this area.

## For More Information

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