



NHMRC

CREATE

The Centre of Research Excellence in Aboriginal Chronic Disease Knowledge Translation and Exchange

CREATE Bulletin

Issue 11, 18 December 2015

Welcome to Issue 11 of the CREATE Bulletin. In this bulletin you will find recent publications, general news and updates of progress on the priority projects. We have also provided information about how you can be involved.

General News

Best Practice Domain

Framework to assist Aboriginal Health Services to develop a Best Practice Models of primary healthcare service delivery

The Best Practice Domain has been progressing throughout 2015 in preparation for 2016. Activities include moving forward with the initial scoping review and starting two additional systematic reviews, seeking letters of support from Aboriginal community controlled health services and ethics approval from the relevant ethics committees from around Australia.

In 2016, we will commence with Phase 3 – conducting case studies with identified health services. Participating health services will have the opportunity to have either their entire services or an aspect of their services which is considered best practice developed into a case study which will inform the development of a framework to assist *Aboriginal Health Services to develop Best Practice Models of primary healthcare service delivery*. We will also be establishing our national reference group which will help inform and develop the final framework.

For further information or if you would like to be involved in any of the activities for 2016 please contact Stephen Harfield at stephen.harfield@sahmri.com

What Keeps You Strong? Supporting the Wellbeing of Older Aboriginal and Torres Strait Islander Communities

A systematic review which aims to identify what strategies have or could be implemented in primary healthcare or aged care services to support the wellbeing of older Indigenous peoples living anywhere in the world has been completed. A number of strategies from not only service providers but importantly community members were identified including those that:

- helped to maintain Indigenous identities;
- promoted independence, and
- delivered culturally safe care.

The Expert Advisory Group comprising of senior Aboriginal Elders, Aboriginal and non-Indigenous aged-care managers as well as researchers from CREATE have assisted in the submission of a funding application designed to support the development and piloting of a framework and associated resources to assist service providers.

Sustainable Funding Domain

1. Unpacking the MBS for the Aboriginal and Torres Strait Islander health sector

The MBS is a growing source of revenue for most of the Aboriginal and Torres Strait Islander Health sector, both community controlled and State or Territory funded. There are resources available to guide the sector on the rules around the MBS and the Aboriginal and Torres Strait Islander people specific MBS items. This tool is designed to assist members of the sector to clarify their thinking around strategic use of the MBS as a source of income.

2. Unpacking Fund pooling for the Aboriginal and Torres Strait Islander health sector

The complexities that arise from multiple sources of funding for the sector are well known; the Over Burden report quantified the consequences of some of this situation. Block funding (cashing out, fund pooling and bundled funding) has been proposed as an alternative to multi budget funding. This tool is intended to assist members of the sector in clarifying their thinking around the realities (intended and unintended consequences) of pooling funds from a number of sources.

3. Why CQI and peer group benchmarking using samples of patients is misleading

The approach to continuous quality improvement (CQI) recommended for Aboriginal and Torres Strait Islander health services by the Royal Australian College of General Practice relies on indicators developed from reviews of samples of 20 to 40 patients. ^[1] The statistical

^[1] <http://www.racgp.org.au/your-practice/standards/interpretiveguide4thedition/appendices/appendix-b/>

phenomena of “regression to the mean” and the role that chance plays in the CQI process, are illustrated. This tool allows users to simulate this phenomena under a range of assumptions and assess the significance of these effects for the application of small sample patient audits in CQI.

In addition, three related papers are close to completion.

- 1. The relationship between Legislation and the financial viability of the sector.**
How the legislative structure around funding and financing mechanisms for primary care for Aboriginal and Torres Strait Islander people differs from that for other Australians and what this means for the sector and the community.
- 2. Monitoring mainstream**
The case for using Medicare data to improve the accountability of mainstream primary care providing services to Aboriginal and Torres Strait Islander people
- 3. The case against small sample audits in CQI**
Patient audits alone are not an alternative to whole of practice reviews for continuous quality improvement

Publications

Dyer, SM., Streak Gomersall, J., Smithers, LG., Davy, C., Coleman, DT., & Street JM. (2015) Prevalence and Characteristics of Overweight and Obesity in Indigenous Australian Children: Systematic Review. *Critical Reviews in Food Science and Nutrition*.

Streak Gomersall, J., Aromataris, E., Brown, A., Dwyer, J., Stephenson, M., O'Donnell, K., Canuto, K., Carter, D., & Gibson, O. (2015) Characteristics and value of Aboriginal Community Controlled Health Organizations' primary health care and their financing needs: a protocol for systematic evidence reviews. *JBI Database of Systematic Reviews and Implementation Reports*, 13(6), 139-167.

Contact: Karen.glover@sahmri.com, or the create website.

several years a Research Program Leader in the Cooperative Research Centre for Aboriginal and Torres Strait Islander Health (the Lowitja Institute). She teaches in the Flinders' Masters of Health Administration, and conducts research focused on health system governance and design, with a particular focus on Aboriginal health services. Professor Dwyer is Deputy Chair of the board of Cancer Council South Australia, and a director of Cancer Council Australia. She has extensive policy consulting experience, and is an author of the leading text *Project Management in Health and Community Services, 2nd edition*, published by Allen and Unwin in 2013. Professor Dwyer is the 2014 recipient of the Sidney Sax medal, awarded annually by the Australian Healthcare and Hospitals Association in recognition of life-long contribution to Australia's health.

New Faces at CREATE



Judith Dwyer, MBA, FAICD, FCHSM

Professor of Health Care Management
Flinders University School of Medicine

Professor Judith Dwyer is Director of Research in the Department of Health Care Management at the Flinders University School of Medicine, and a former CEO of Southern Health Care Network in Melbourne, and of Flinders Medical Centre in Adelaide, having worked in the Australian health system for more than 20 years. She was for



Harold Stewart

Harold Stewart is currently working with SA Health & Medical Research Institute as a senior cultural advisor, to a number of projects, including the CREATE project.

Cultural background and career in Aboriginal Affairs

Harold is a senior Indigenous Koori man, he is an elder of the Eora Nation originally from the La Perouse community in NSW. Harold has lived in SA for nearly 39 years, and had a long career in the Australian Government for 26 years including in Employment and Training and in the Department of Health and Ageing mainly in Aboriginal Health. Harold has worked in



Aboriginal Languages research and revival as the Manager of Yaitya Warra Wodli Language Centre. He also worked in SA Health in senior policy roles in Aboriginal Health and also in the Mental Health Unit. In addition, Harold worked with the Aboriginal Health Council of SA as the Tackling Smoking Coordinator.

During Harold's time in State Government he served as a member of the Ministerial Reference Group on Tobacco. He is a current member of the SA Health Suicide Prevention Advisory Committee and also serves on the Health and Community Services Complaints Advisory Council both by ministerial appointment (Min John Hill former Health Minister). Harold is currently doing post graduate studies in the Master of Public Health at Deakin University in Geelong Victoria.

Harold is a well-respected Elder who is well known in the national Aboriginal Affairs arena and he is highly regarded in Aboriginal communities in South Australia.

Karen Glover



Karen has joined the team as the CREATE Program Manager.

Karen is a Mein:tnk woman from SE SA and also from the Wotjobaluk nation in NW Victoria.

Karen has most recently worked as the CEO at Pangula Mannamurna, the Aboriginal community controlled health service located in Mount Gambier, and she brings knowledge and experience of the sector to contribute to the team.

Prior to working in Mount Gambier, Karen worked in senior policy and management roles in both state and federal public service in the areas of policy and service development. Her work included Aboriginal health and wellbeing, maternal and child health, housing and homelessness and family and lateral violence.

Karen has also contributed to research through the Aboriginal Families Study relating to improving Aboriginal birthing outcomes. Her role was the chair of the Aboriginal Advisory Group and also in investigator roles.

Karen has two children and two grandchildren and has relocated back to Adelaide to be closer to them.



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