

NT Aboriginal Health KPIs: health, data and change Territory style

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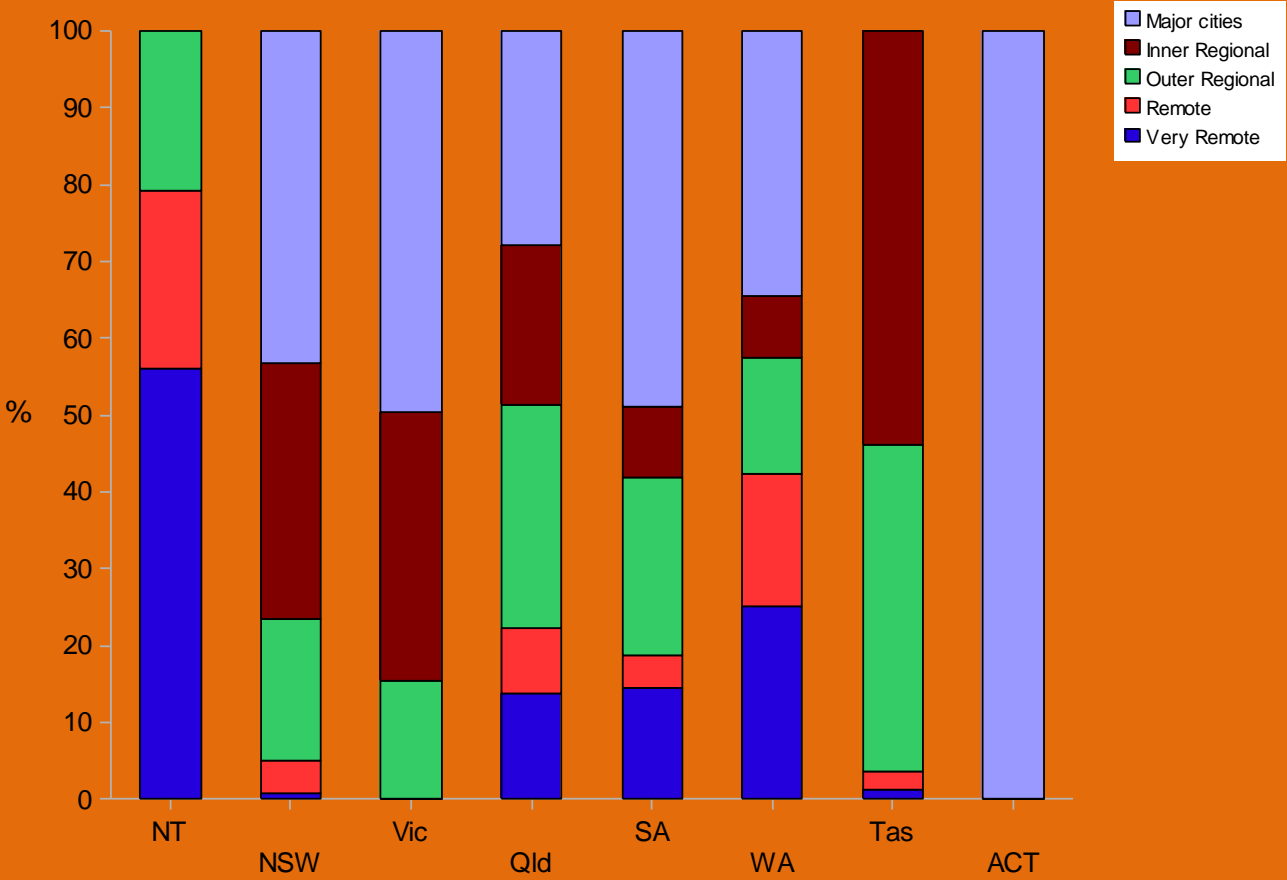
Overview

- NT Indigenous health care landscape
- Development of CQI and clinical indicators in the NT
- NT AHKPIs governance
- Examples of NT AHKPI in use
- Relationship of NT AHPKPIs and national NKPIs
- Challenges and looking forward

NT Indigenous healthcare landscape

- NT population 236, 300, with 64,005 or 27% of the total population (ABS, 2012)
- Wide distribution
- Health care: ACCHSs, NT Government clinics, mixed services.

Remoteness Areas: Indigenous population 2006



Source: ABS Population Characteristics, Aboriginal and Torres Strait Islander Australians, 2006

CQI and CI history in the NT

- Audit and Best Practice for Chronic disease: ABCD
 - 2002 to 2009 Action research approach
- Influenced Healthy for life
- One21seventy (not for profit commercial enterprise) formed out of ABCD.
- ACCHSs have also participated in Australian Primary Care Collaboratives.
- CQI funding as part of EHSDI
 - CQI facilitators
- The NT indicators can be used as initial data source for CQI supplemented by further data/clinical audits.

NT AHKPIs

- NT Aboriginal Health Forum identified need for KPIs
- Identified 44 AH KPIs, agreed to implement 19 (12 quantitative, q7 qualitative)
- Collaboration: NTAHF, DoH, DoHA and AMSANT/ACCHS
- Governance:
 - Steering committee
 - Clinical reference group (changes and additions to existing NT AHF KPIS)
 - Technical working group (mainly issues with data extraction)
 - Robust data governance protocol
 - DoH is the data custodian (health data unit).
 - Services own their own data.
 - OATSIH receive identified reports for every clinic (ACCHS and DoH)
- New NT AHKPIs: RHD, immunisation timeliness in kids <twelve months STI testing and diabetes control (also a nkpi)

Example of NT AHKPI in use

- Childhood anaemia:
 - Clinician level: my patients
 - Service level: our systems, our community
 - Regional level: our network, our relationships
 - NT level: our sector

Challenges encountered with NT AHKPIs

- Denominator number: clients, community, subsets
- Cross border care
- *Discrepancy caused by clinical activity undertaken through other sectors beside Aboriginal PHC sector (e.g. immunisation)*
- Importance of open and transparent processes

NT AHKPI and N KPIs

- N KPIs primarily to assist Government assess PHC contribution to Closing the Gap
 - focus on chronic disease, child health in line with purpose
- Secondary purpose is for CQI
- Roll outs 2011 (HFL), 2012 all ACCHs, 2013 8 new indicators, 2014 all sites reporting on 24 indicators

Future of the NT AHKPIs

- Opportunity for integration
- NT AHKPI still maintain their worth:
 - Targeted data set
 - Universal across the NT (Remote Health NTG not yet reporting nKPIs)
 - Different health issues and priorities
- Funding uncertainty
- Advocacy and planning at the Territory level

Summary

- Collaboration and engagement
- Purpose of data collection needs to drive measures and methods
- Powerful tool at many levels
- Always room for improvement

Thank you!

- Dr. Liz Moore, PHMO AMSANT
- Dr. Alex Hope, AMSANT
- Kerry Copley, CQI AMSANT
- Dr. Gary Sinclair, Remote Health
- <http://www.nt.gov.au/health/ahkpi/>
- <http://www.one21seventy.org.au/>

NT AHKPIs

- **Domain 1: Health Services**
- **Number of episodes of health care and client contacts.**
- **Timing of first antenatal visit for regular clients delivering Indigenous babies.**
- **Number and proportion of low, normal and high birth weight Indigenous babies.**
- **Number and proportion of Indigenous children fully immunised at 1, 2 and 6 years of age.**
- **Number and proportion of children less than 5 years of age who are underweight.**
- **Number and proportion of children between 6 months and 5 years of age who are anaemic.**
- **Number and proportion of clients aged 15 years and over with Type II Diabetes and/or Coronary Heart Disease who have a chronic disease management plan.**
- **Number and proportion of resident clients aged 15 years and over with Type II Diabetes who have had an HbA1c test in the last 6 months.**
- **Number and proportion of diabetic patients with albuminuria who are on ACE inhibitor and/or ARB.**
- **Number and proportion of Indigenous clients aged 15 to 55 years who have had a full adult health check.**
- **Number and proportion of Indigenous clients aged 55 years and over who have had a full adult health check in the past 12 months.**
- **Number and proportion of women who have had at least one PAP test during reporting period.**
- **Proportion of children who have received immunisations on time.**
- **The number and proportion of Aboriginal clients with Type II diabetes and whose HbA1c measurements are within certain levels.**
- **Number and proportion of Indigenous ARF / RHD patients who are prescribed to be requiring 2-4 weekly BPG Penicillin Prophylaxis and have received 80% of their injections over a 12 month period**