Lighthouse hospital project

Introduction

In Aboriginal and Torres Strait Islander peoples, cardiovascular disease occurs earlier, progresses faster and is associated with greater co-morbidities, requiring more frequent admission to hospital and premature death when compared with non-Indigenous Australians.[1] Major coronary events, such as heart attacks, occur at a rate three times that of the non-Indigenous population, with fatalities as a result of these events 1.5 times more likely, making it a leading contributor to the life expectancy gap.[2]

Phase 1 (2012–2013)

Aim – To improve the care of Aboriginal and Torres Strait Islander peoples experiencing acute coronary syndrome (ACS).

This project was developed in response to a 2006 report from the Australian Institute of Health and Welfare (AIHW). The initial work of the project focused on the key elements of culturally safe, positive consumer experiences as reviewed by 10 organisations recognised by their peers as providing exemplary care in the treatment of Aboriginal and Torres Strait Islander patients with ACS.

The project identified a number of key elements that make a difference to ACS care:

• expansion and optimisation of roles for Aboriginal Liaison Officers, Aboriginal Health Workers, Aboriginal Patient Pathway Officers and equivalent roles
• better identification of Aboriginal and Torres Strait Islander patients
• effective partnerships and communication channels with local Aboriginal and Torres Strait Islander communities and other relevant organisations
• fostering and supporting clinical champions
• building capacity for patient-centred care
• use of technology
• use of an industry-based quality matrix.

Phase 2 (2013–2016)

Aim – To drive systemic change in acute care hospital settings to improve care for and the experience of Aboriginal and Torres Strait Islander peoples experiencing ACS.

In Phase 2, the scope was to develop and implement a quality improvement approach to activities in eight public hospital sites across Australia to improve the clinical and cultural care of Aboriginal and Torres Strait Islander patients with ACS.

A quality improvement toolkit, ‘Improving health outcomes for Aboriginal and Torres Strait Islander peoples with acute coronary syndrome’, was developed to provide a framework to address the disparities between Aboriginal and Torres Strait Islander peoples and non-Indigenous Australians with ACS. The toolkit aims to:

• ensure that minimum standards of care, cultural safety and quality are met
• identify practices and actions that can and/or should be improved
• foster engagement
• enhance service appropriateness
• improve service delivery for the care of Aboriginal and Torres Strait Islander peoples with ACS.

The toolkit outlines four domains that are critical in the provision of holistic care for Aboriginal and Torres Strait Islander peoples and their families as they journey through the hospital system and return to their communities.

The four domains are:
• governance
• cultural competence
• workforce
• care pathways.

Each site developed a hospital action plan that outlined the domain(s) they would address and the quality improvement activities they would undertake during the pilot.

The project outcomes were dependent on community engagement, capacity to embed change, project support and the governance structures at each site.

Key Phase 2 achievements

• Improved relationships with Aboriginal and Torres Strait Islander patients
• Development and strengthening of relationships with the Aboriginal and Torres Strait Islander community and medical services
• Creation of a culturally safe environment for Aboriginal and Torres Strait Islander patients
• Increase in the self-identification of Aboriginal and Torres Strait Islander patients
• Streamlining of processes related to the culturally appropriate and clinical care of Aboriginal and Torres Strait Islander patients
• Enhanced staff capacity to respond to the needs of Aboriginal and Torres Strait Islander patients

Eight pilot hospitals participated in testing the toolkit:
• Bairnsdale Regional Health Service, Victoria
• Coffs Harbour Health Campus, New South Wales
• Flinders Medical Centre, South Australia
• Liverpool Hospital, New South Wales
• Princess Alexandra Hospital, Queensland
• Royal Perth Hospital, Western Australia
• St Vincent’s Hospital, Victoria
• Tamworth Rural Referral Hospital, New South Wales.

The Lighthouse hospital project is a joint initiative of the Heart Foundation and the Australian Healthcare and Hospitals Association and is funded by the Australian Department of Health.

References


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POS-PRO-42