



Improving Health Equity to primary care for First Nations Peoples living in Northern Queensland

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Acknowledgment

Northern Queensland Primary Health Network (NQPHN) acknowledges the Traditional Custodians of the lands and seas on which we live and work, and pay our respects to Elders past and present.

The Challenge

Northern Queensland Primary Health Network's (NQPHN's) **First Nations Continuous Quality Improvement (CQI) Program** was developed to improve the health equity of primary health care services for First Nations People living in northern Queensland.

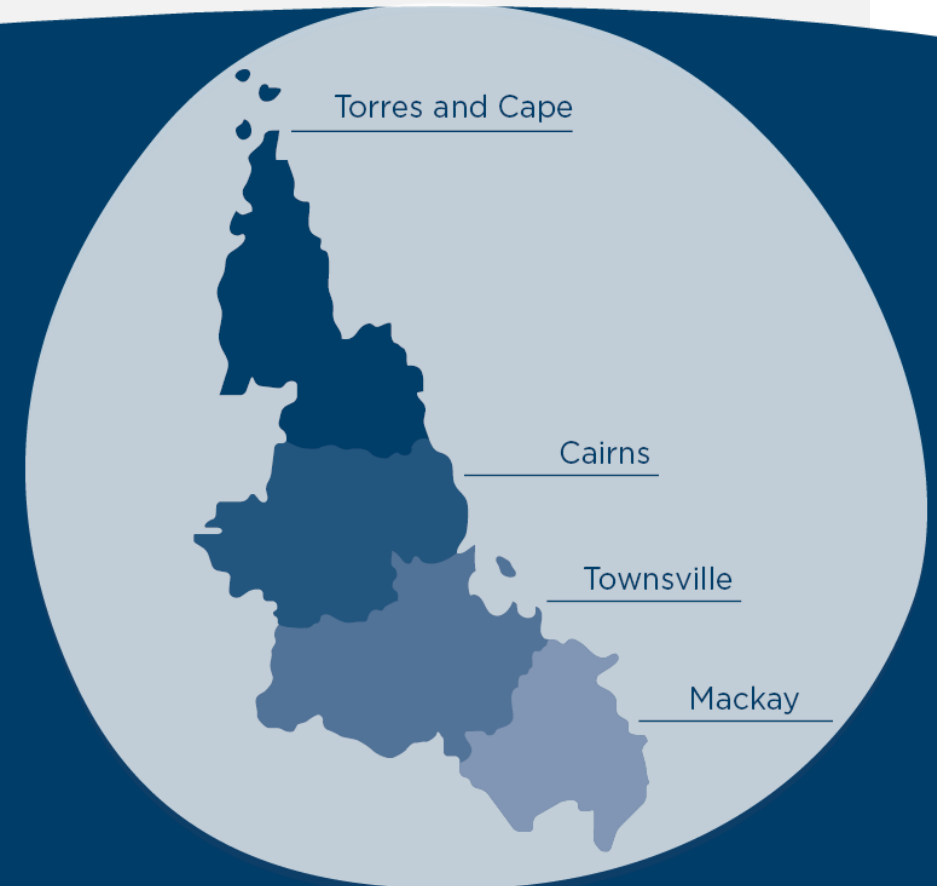


The Challenge (continued)

To improve the overall health and wellbeing of NQPHN's First Nations population, a targeted education and training program developed for clinical and non-clinical staff, utilising patient and provider-facing digital health tools and platforms.

13.75%
(80,000 total population)

Identified First Nations people in NQ had a 715 Health Assessment (715) billed in a 12-month period.



The Objectives

Work with partners to provide First Nations People with increased access to coordinated, quality, and culturally safe care.

- Improve the identification and documentation of First Nations primary care patients in clinical software systems.
- Increase access of First Nations primary care patients to the Closing the Gap Program PBS co-payments through registration.
- Increase the delivery and quality of the 715 Aboriginal and Torres Strait Islander Health Assessments.
- Enhance the capability and capacity of non-Aboriginal Medical Service (AMS)/Aboriginal Community Controlled Health Organisation (ACCHO) providers to deliver culturally and clinically appropriate 715 Aboriginal and Torres Strait Islander Health Assessments.

The Objectives (continued)

- Improve the management of complex and chronic disease in First Nations Australians across northern Queensland.
- Foster culturally safe environments for Aboriginal and Torres Strait Islander peoples to obtain medical care and assessment.
- Assist 'mainstream' general practices and AMSs to meet Accreditation 5th standards.
- Increase Practice Incentive Payment (PIP-IHI) Indigenous Health Incentive.
- Improve practice data quality.
- Improve integration and collaboration across primary care providers.

The Who

Participating services (75)



- Mainstream general practice (includes RFDS) (48)
- Primary Health Care Centres (21)
- Aboriginal Community Controlled Health Organisations (ACCHOs) / Aboriginal Medical Services (AMSs) (6)

The Approach

Education and upskilling

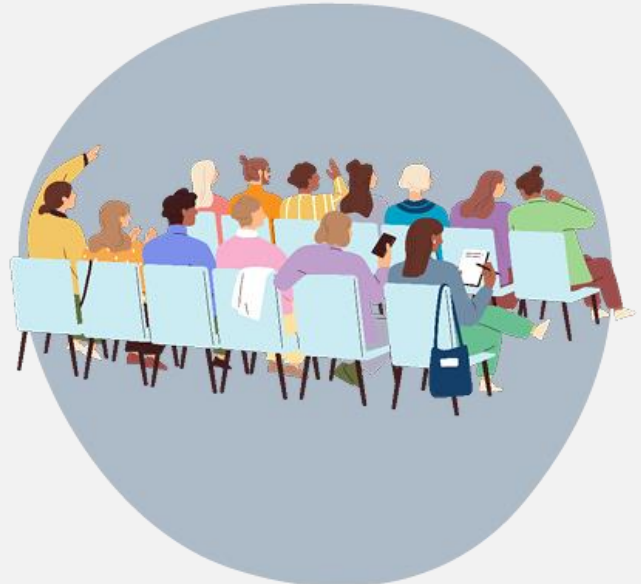
Online Toolkits (5)



Webinars



Education events

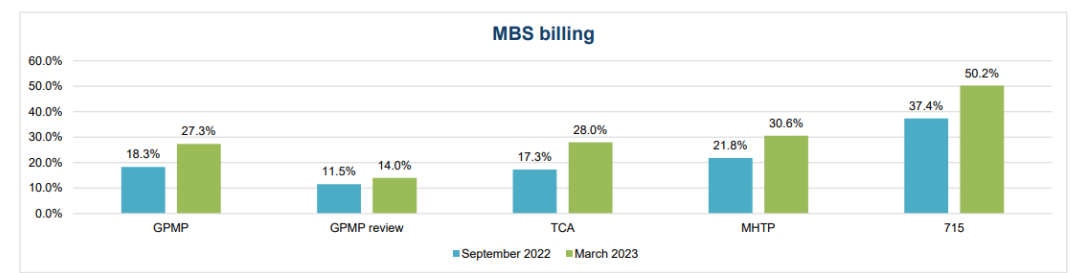


The Approach (continued)

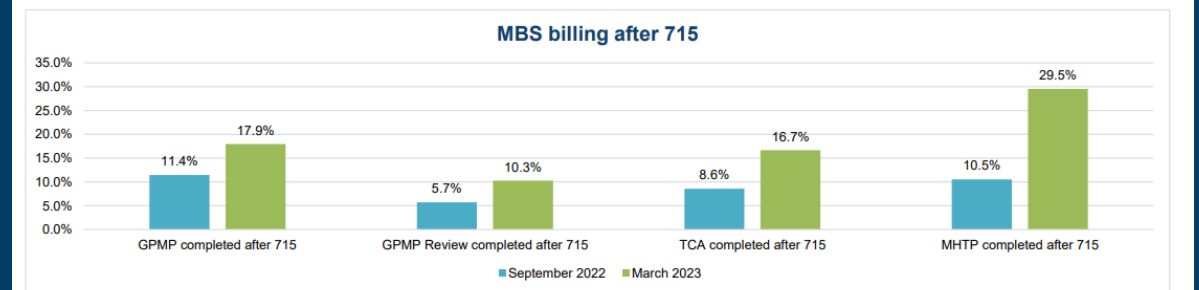
Data shared with participating services

Demographic profile	September 2022		March 2023		Change
	#	%	#	%	
Total First Nations patients	265		426		161

MBS billing	September 2022		March 2023		Change
	#	%	#	%	
GPMP	19	18.3%	41	27.3%	9.06% ↗
GPMP review	12	11.5%	21	14.0%	2.46% ↘
TCA	18	17.3%	42	28.0%	10.69% ↗
MHTP	12	21.8%	26	30.6%	8.77% ↗
715	99	37.4%	214	50.2%	12.88% ↗



MBS billing after 715	September 2022		March 2023		Change
	#	%	#	%	
GPMP completed after 715	4	11.4%	14	17.9%	6.52% ↘
GPMP Review completed after 715	2	5.7%	8	10.3%	4.54% ↘
TCA completed after 715	3	8.6%	13	16.7%	8.10% ↘
MHTP completed after 715	2	10.5%	13	29.5%	19.02% ↗



The Approach (continued)

Digital platforms

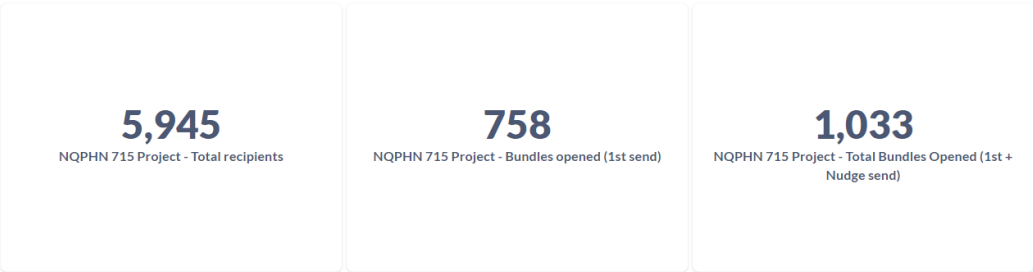


[NQPHN First Nations CQI Program \(www.goshare.com.au\)](http://www.goshare.com.au)

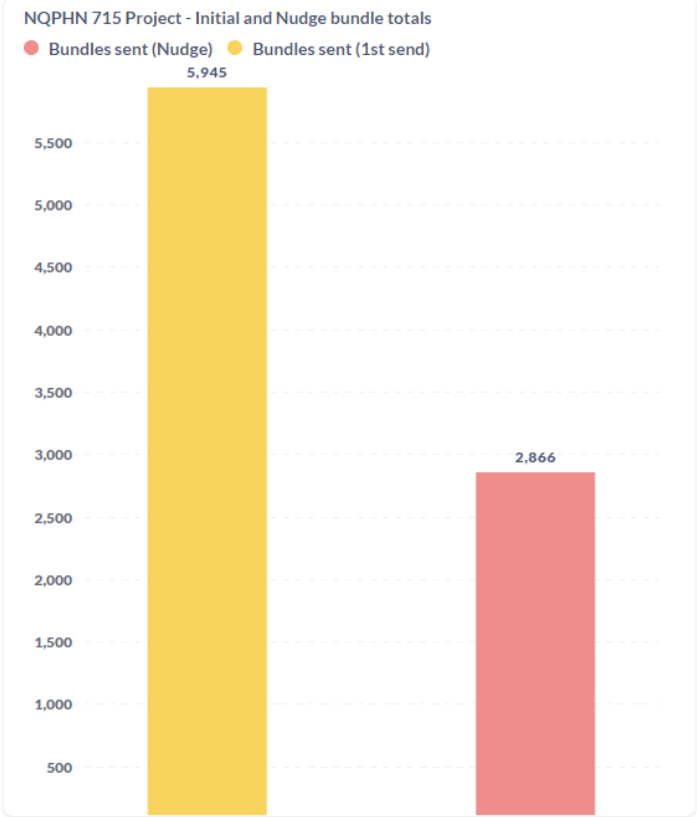
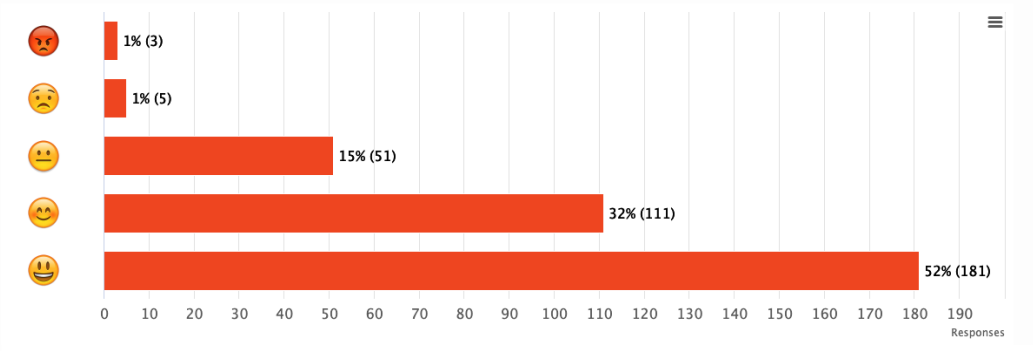
The Impact

GoShare Bundles

NQPHN 715 Project



84% of patients who provided feedback found the information helpful or very helpful.



Patient incentives

Free merchandise given to patients:

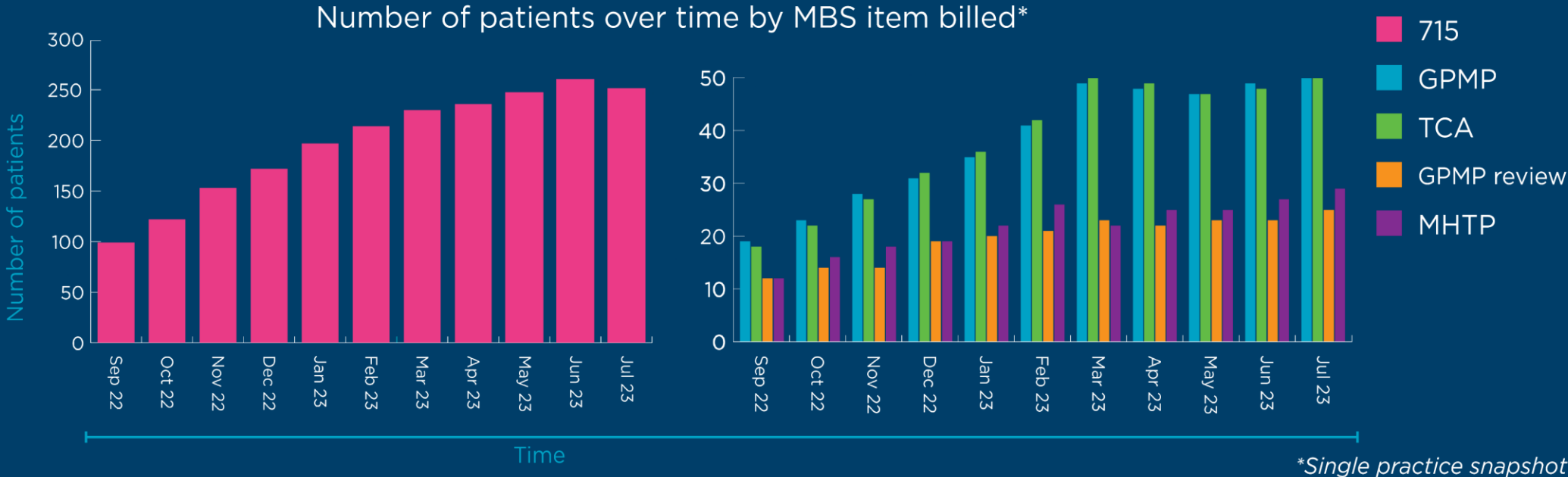
- 715 branded caps
- 715 branded water bottles



The Learnings

Success of the program

Data sources and early results



*Single practice snapshot

Questions



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