

Summary

In Australia, monitoring system performance through routine data collection has become a significant area of policy development in Aboriginal and Torres Strait Islander primary health care services and specifically in the Aboriginal Community Controlled Health Organisation (ACCHO) sector. One monitoring mechanism is the national key performance indicator (nKPIs). The nKPIs are a set of mandatory indicators collected from primary health

care organisations that receive funding through the *Indigenous Australian's Health Program* to provide services primarily to Aboriginal and Torres Strait Islander peoples. These include predominantly ACCHOs but also mainstream primary health care services, PHNs and non-government organisations. The nKPIs were introduced in 2012 and include 24 indicators that collect information on clinical processes and health outcomes with a focus on chronic disease management,

preventive health, and child and maternal health. The development and implementation of the nKPIs has been challenged with paternalistic approaches, a lack of engagement with the ACCHO sector and multiple changes in data extraction tools. A range of potential policy recommendations are provided to promote development of relevant nKPIs that can facilitate improvements in quality comprehensive health care in ACCHOs.

Challenges and Policy implications

The ACCHO sector faces several challenges in relation to the nKPIs. The table describes some of these challenges and poses potential policy level responses to strengthen the utility of the nKPIs for the ACCHO sector.

	Challenge	Potential policy level response
Principles and approaches related to the nKPIs	The nKPIs were imposed on the ACCHO sector with a top-down approach rather than with ground-up self-determination, community control and local data sovereignty principles.	Engage the ACCHO sector in the conceptualisation of KPIs that align with ACCHO principles and Aboriginal and Torres Strait Islander ways of being, knowing and doing.
	National benchmarking and jurisdictional comparisons are challenging for the ACCHO sector due to its heterogeneous services, contexts and populations.	
	There are differing accountability requirements for ACCHOs and mainstream primary health care services providing services to Aboriginal and Torres Strait Islander clients.	Ensure there are equitable accountability requirements for ACCHOs and mainstream primary health care services.
Development of nKPIs	The tokenistic nature of nKPI consultations has led to a lack of engagement with or ownership by the ACCHO sector.	Engage the ACCHO sector as equal partners in the leadership, development and ongoing implementation of relevant nKPIs.

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	Challenge	Potential policy level response
Implementation of nKPIs	Numerous data extraction tools (i.e. manual, PEN Clinical Audit Tool, Canning Tool) and data management portals (e.g. OCHREStream and Health Data Portal) have been imposed on the ACCHO sector which negatively impacts data quality and burdens ACCHO resources due to change management challenges.	Support the ACCHO sector during change management cycles and develop a detailed Interpretive Guide to the nKPIs including Fact Sheets.
Utility of the nKPIs	<p>ACCHOs see limited value in the nKPI dataset including for CQI purposes since:</p> <ul style="list-style-type: none"> nKPIs are at odds with ACCHO ways of working as they have a biomedical focus and do not capture comprehensive PHC to address the social determinants of health better data is collected elsewhere (i.e. Australian Immunisation Register and National Cervical Screening Program) the client definition is inappropriate for some ACCHOs especially those with transient populations some relevant indicators are missing (e.g. health checks for 6-24 year olds, sexually transmitted infections, mental health, oral health, social determinants of health activities) 	<p>Undertake a co-design process led by the ACCHO sector that considers the following:</p> <ul style="list-style-type: none"> develop a set of nKPIs that reflect the heterogeneity of the ACCHO sector and that include qualitative indicators establish a process whereby ACCHOs can select relevant indicators from an agreed, standardised, national indicator set remove specific nKPIs related to immunisation and cervical screening engage the sector to determine an agreed client definition develop indicators related to health checks for 6-24 year olds, sexually transmitted infections, mental health (e.g. a process indicator related to the proportion of Aboriginal and Torres Strait Islander people with a mental health plan¹), oral health and social determinants of health activities
ACCHO workforce and governance challenges	ACCHOs face staff capacity challenges in relation to nKPIs and data (i.e. patient information management system data entry and extraction, and interpretation of nKPI reports).	<p>Resource the ACCHO sector (both NACCHO jurisdictional affiliates and member services) to build staff capacity in relation to nKPIs including training on the patient information management system and on collecting, reporting and using the nKPIs in CQI activities.</p> <p>Provide external supports to build capacity in ACCHO workforce (e.g. network meetings, email and phone support, professional development training).</p>
	ACCHOs that face difficulties in attracting and retaining GPs (often in regional and remote locations) find it difficult to meet nKPI targets.	Consider how the nKPIs disadvantage ACCHOs that face workforce supply shortages.

¹Note: any nKPI related to mental health should be consistent with the National Strategic Framework for Aboriginal and Torres Strait Islander Peoples' Mental Health and Social and Emotional Wellbeing 2017-2023

The content within this policy brief was drawn from Aboriginal and Torres Strait Islander led research undertaken by the Centre of Research Excellence in Aboriginal Chronic Disease Knowledge Translation and Exchange (CREATE), Wardliparingga Aboriginal Health Equity, South Australian Health and Medical Research Institute.

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