

THE LIGHTHOUSE PROJECT: BROADENING THE FOCUS ON INDIGENOUS PATIENT CARE QUALITY

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Flinders Medical Centre (FMC) has been involved in the provision of cardiac surgery to Aboriginal and Torres Strait Islander (ATSI) patients from South Australia and the Northern Territory resulting in approximately 30% of the Cardiac Surgery performed for Australia's indigenous population being performed at Flinders. This equates to approximately 20% of the cardiac surgery performed annually at FMC. Flinders is unique as the majority of our indigenous patients travel vast distances to come for surgery, from many different lands and cultural backgrounds. This provides unique challenges that are amenable to improvement, such as interstate travel and transport needs; distance communication, preparation and follow-up; and multiple language and cultural variation considerations.

With this in mind, the cardiothoracic surgical unit (CTSU) team has committed to achieving systematic change within FMC and CTSU to improve outcomes for ATSI peoples who have been accepted for and have undergone Cardiac Surgery. The Lighthouse Project, now in its third phase has helped, facilitated and enabled change to occur at Flinders. In brief the Lighthouse Project is a joint initiative of the Heart Foundation and the Australian Healthcare and Hospitals Association, funded by the Australian Department of Health to improve the ATSI People's pathway through hospital when presenting with Acute Coronary Syndrome.

The aim of the third phase of the Lighthouse Hospital Project was to reduce the incidence of discharge against medical advice by ATSI peoples presenting at hospital with Acute Coronary Syndrome.

To achieve this the project aimed to work with participating hospitals to:

- provide care that is culturally safe and appropriate, responsive, accessible and evidenced-based
- improve the care of ATSI patients
- enhance the relationships and co-ordination of care between the hospitals; Aboriginal Community Controlled Health Organisations; Aboriginal Medical Services; Primary Health Networks and other health care providers.

The aims of the project, designed for acute care, were not such a good fit for Flinders as the only cardiac surgical centre, however our local goals were clearly aligned with the project.

Our main aim was to achieve systematic change within FMC and CTSU to improve outcomes for ATSI peoples who have been accepted for and have undergone Cardiac Surgery through the following objective:

- To improve the experience and care of ATSI patients who present to Flinders Medical Centre requiring Cardiac Surgery, ensuring they receive evidence-based care in a culturally safe and appropriate manner.

In order to be successful one of the goals of the lighthouse project was to ensure the involvement of governance by the hospital CEO being instrumental in hospital participation. To achieve this we needed to identify areas of change to which the hospital would also be sensitive and provide external support. In 2017 changes by the Australian Commission on Safety and Quality in Health Care (ACSQHC) included six actions that were specifically

included to meet the needs of ATSI people within the National Safety Quality Health Service (NSQHS) Standards. In addition, the SA Aboriginal Heart and Stroke Plan, the SALHN Reconciliation Action Plan, the SA Aboriginal Chronic Disease Consortium, and a revision of the SA Aboriginal Health Care Plan currently underway, has brought Aboriginal Health to the forefront of our state's priorities. Collectively we have been in a better position to evoke long term, sustainable change, not only in Cardiac Surgery, but across SALHN as part of the Lighthouse Hospital Project. Importantly we were fortunate maintaining continuity between the Phase 2 and phase 3 projects.

An Action Plan was designed through consultation with our Karpa Ngarrattendi Aboriginal Liaison Unit, Aboriginal Family Clinic and Aboriginal Health staff, as well as individual discussion with patients as they came through hospital, asking what they felt might make a difference to their hospital stay. As our Lighthouse Hospital Project Action Plan needed to accommodate ATSI patients from a wide geographical base – crossing many communities across South Australia, Northern Territory, northern WA, and northern Queensland – consultation with our patients, escorts and Karpa Ngarrattendi staff was seen as the best way to receive consumer advice and feedback from the many different cultural backgrounds that made up our patient pool. We also held teleconferences with the Northern Territory Lighthouse Hospital Project Team in the early days of Phase 3 to match goals that might help both sites to improve the pathway for the many patients who travelled across both states for their health care. Having mapped pathways, and commenced quality improvement initiatives in Phase 2, these were carried into Phase 3 and adjusted or built upon to enrich and embed the good work already accomplished.

In brief the key achievements off the project have been:

- *Employment of aboriginal health practitioners.* Two Aboriginal Health Practitioners, one male, one female, joined our Cardiac and Thoracic Surgical Unit (CTSU) as full-time members of our multi-disciplinary team. The two roles are working across three areas: Cardiac Surgery, Cardiology and Intensive Care, and there has been a lot of attention across the hospital as we bring health practitioners into acute care. They are the first Aboriginal healthcare individuals being trained in Cardiology in South Australia. This initiative has been recognised by patients and staff as bringing cultural awareness and cultural sensitivity to the forefront of the care we provide. Their involvement in patient consenting, patient (and staff) education, and their involvement in the care for our ATSI patients and escorts has been instrumental in starting a better understanding and acceptance in the diverse backgrounds that we see in Cardiac and Thoracic Surgical, Cardiology and Intensive Care patients. This in turn has instigated a noticeable change in staff culture.
- *Accommodation.* Two units have been secured by CTSU (a third is on the way) to provide accommodation for patients from rural and remote areas. The accommodation serves all patients and is situated approximately 200 metres from the hospital.
- *A welcoming environment for ATSI Patients.* Through a number of initiatives including the development of artwork, the provision of an iPad (entertainment and communication); Welcome Bags (containing colouring books and pencils, puzzle books and packs of cards as part of our, and hand-made heart pillow cushion covers, in Aboriginal artwork material), we are striving towards providing a more welcoming environment. By providing entertainment needs we also hope our ATSI patients feel more supported, and less restless or isolated.

- *Asking the question: are you of Aboriginal and/or Torres Strait Islander origin?* Working with the Aboriginal Health Steering Committee, we have commenced front line “Asking the Question: Are you of Aboriginal and/or Torres Strait Islander Origin” training. Each participant receives a resource book and face-to-face training, as well as an online training course for future front line staff.
- *Artwork.* We commissioned a local artist to design artwork that incorporated the message of walking together towards better health in cardiac surgery. He produced the beautiful piece PADNINTHI KUMANGKA MARNI. The artwork is now integrated into the up on the ward, and other parts of the patient pathway.

By participating in the Lighthouse project it has allowed Flinders to develop in many ways and to understand some important learnings:

- *Change takes time.* Flinders Medical Centre has been involved in the Lighthouse Hospital Project since Phase 1 in 2013, and really only began to get momentum in changing hospital cultural and thinking nearing the end of Phase 2 in 2016 in ATSI health and how it is managed in acute care settings.
- *State and Federal Government Support is important to invoke change.* The increase in Government and State projects producing guidelines such as ACSQHC changes to National Safety and Quality Health Service Standards, and the User Guide for ATSI Health; as well as the local SA Aboriginal Health Performance Network Report, SA Health Aboriginal Workforce Framework 2017-2022; SA Aboriginal Heart and Stroke Plan, the Aboriginal Chronic Disease Consortium; and SA Health Reconciliation Plan 2017-2019, all contribute to a stronger base to reference when trying to invoke change. By the states and hospitals needing to make change to meet accreditation and these guidelines, we have been given strength to aid possible sustainability for Lighthouse Hospital Project initiatives by being provided a broad research base of facts and figures which support the changes suggested.
- *Financial support is key.* Financial support continues to be the biggest barrier to sustainability. Despite wide-spread support for the initiatives commenced through the Lighthouse Hospital Project, we are still finding that the bureaucracy of financial accountability is making it difficult to sustain these projects long-term.

Perhaps the biggest achievements of like the Lighthouse project at Flinders has been some of the recent developments at our institution including the development of the SALHN ATSI Cultural Advisory Committee (April 2019), the edition of the Chair of the Cultural Advisory Committee to the SALHN Aboriginal Health Steering Committee (April 2019), and the newly appointed SALHN Governing Board (May 2019) which includes a Waljjen woman.

To conclude Flinders Medical Centre has been fortunate to be involved in all 3 phases of the Lighthouse Hospital Project and we have been able to expand and build upon this project. We are now clearly seeing systemic change in Cardiac Surgery and have begun to see the work of Lighthouse extend into other areas of the Southern Adelaide Local Health Network (SALHN).

