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### Using unannounced standardised patients as a quality improvement tool to improve primary care

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## Using unannounced standardised patients as a quality improvement tool to improve primary care

### Abstract

Abstract presented at the 2nd International Conference on General Practice & Primary Care, 18-19 September 2017, Zurich, Switzerland

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2<sup>nd</sup> International Conference on

# General Practice & Primary Care

September 18-20, 2017 | Zurich, Switzerland

## Using unannounced standardised patients as a quality improvement tool to improve primary care

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**Background:** The Alma Ata declaration states that primary health care should be socially acceptable and universally accessible. Access to primary care has an impact on health outcomes and can contribute to closing the health gap between indigenous and non-indigenous populations. Despite significant government intervention, access to primary care remains a barrier for many of Australia's Indigenous peoples, the Aboriginal and Torres Strait Islander (Aboriginal) peoples.

**Aim:** To improve the quality and appropriateness of targeted care in general practice for Aboriginal patients using unannounced standardised patients (USP).

**Methods:** This research was a mixed-methods multiple-site case study. USPs from the local Aboriginal communities anonymously attended general practices. Data from these visits were combined with data from focus groups, clinical records audit, interviews and surveys with practitioners and staff, and best practice guidelines, and were used to develop a tailor-made intervention to improve the acceptability and appropriateness of care provided to Aboriginal patients in general practice.

**Findings:** Most practices improved their Indigenous-status identification processes and provided more acceptable and appropriately targeted care to their Aboriginal patients. The use of USPs as a quality improvement tool was acceptable to providers and staff and provided the local Aboriginal communities a voice regarding the care they received.

**Implications/Conclusions:** USPs provide direct patient feedback whilst overcoming many of the inherent biases found in other research methods. Using USPs from the local Aboriginal communities ensured relevance with their priorities and was central to the uptake of the intervention. The method can be adapted as a tool for improving access to primary health care to other minority and marginalised populations.

### Biography

Heike Schutze is a lecturer and research fellow at the University of Wollongong. Her research interests include health services research, Aboriginal and Torres Strait Islander health, indigenous health, health inequity, translational research, and the prevention and management of chronic disease.

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