



2025 Multicultural Health Continuous Quality Improvement (CQI) Initiative

Final Report for Practices

phn
BRISBANE NORTH

An Australian Government Initiative



Purpose

The purpose of this report is to go through the various activities undertaken by practices during in the recent Multicultural Health CQI initiative. Additionally, we have included good news stories and key lessons learned, with the goal of sharing insights from these activities and inspiring practices to expand and build upon these initiatives.

Introduction

Australia has a diverse mix of cultural backgrounds and over 50% of the Australian population was born overseas or has one parent who was born overseas. People from multicultural backgrounds, particularly non-English speaking backgrounds, face a range of challenges including:

- Low English proficiency
- Adjustment to a new country
- Stresses of migration
- Trauma exposure prior to migration
- Loss of close family bond and sense of community
- Racism and discrimination
- Limited opportunities to fully utilise their occupational skills or lack of prior education recognition
- Ongoing media coverage of world events

People from multicultural backgrounds also often face barriers to accessing and navigating the Australian Health Care System through:

- Unfamiliar health systems
- Lack of interpreter access
- Insufficient support to navigate health service systems
- Low health literacy
- GP and health workforce shortages
- Cost of medical care and fewer medical practices bulk billing
- Limited access to transport

The purpose of this report is to outline the activities undertaken by practices, along with individual and regional results. Additionally, we have included positive highlights and key lessons learned, with the goal of sharing insights from various activities and inspiring practices to expand and build upon these initiatives.

Project Overview

To support improvements in multicultural health we identified five initial focus areas

1. Improving practice cultural awareness and competence
2. Increasing Translating and Interpreting (TIS) familiarity and usage
3. Improving Multicultural Health data collection
4. Providing and promoting health resources in languages other than English
5. Improving health outcomes for multicultural populations

Practice Participation

65 Practices from across the Brisbane North region completed the initiative.

CQI Activities Completed

294 individual CQI activities were completed across the 65 practices. Below is a list of the activities completed groups by focus area.

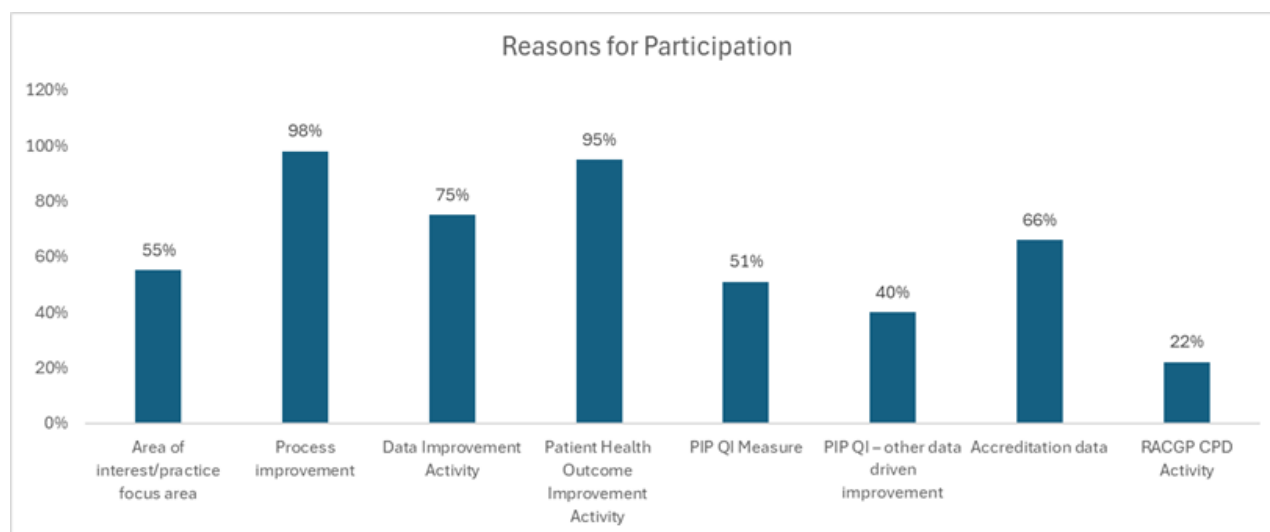
FOCUS AREA	SUGGESTED ACTIVITIES	NUMBER OF PRACTICES WHO DID THIS ACTIVITY
1 - Improving practice cultural awareness and competence	Create a data profile of the practice patient population	6
	Complete CEH Cultural Competence course	54
	Promotion of TIS in languages other than English.	0
	Multicultural health planning session/s to discuss the practice current capacity and capability and how you can improve health outcomes for CALD patients	7
	Patient survey	1
	Assign a Multicultural Champion in the practice team	1
	Work with Mater Multicultural team	1
2 - Increasing TIS familiarity and usage	Information campaign Translating and Interpreting Service (TIS)	19
	TIS training session for staff	42
	Ensure registration of all providers on TIS	3
	Update AHPRA and MHR with languages spoken by practitioners	1
3 - Multicultural data collection	Information campaign on the importance of recording ethnicity. (Posters in waiting rooms, consulting room, treatment room, brochures for patients, information on practice website)	9
	Data cleansing activity	4
	Improve recording of ethnicity, preferred language, country of birth and if an interpreter is required (and year of arrival in Medical Director) percentages and if an interpreter is required	35
	Update new patient registration form to include new ethnicity data fields. Implement a process to update existing patient information via paper form, email, booking/appointment software or check-in kiosk	22
	Update practices processes and procedure document around recording of ethnicity	4
	Identify patients who were born in Australia and who do not require an interpreter	1
4 - Providing health resources in languages other than English	Health literacy resources (e.g. brochures, posters, videos, consent forms) available in languages other than English	46
5 - Improving health outcomes for multicultural populations	Signage about fees, if the practice bulk-bills and after hours care in languages other than English	0
	Training and information session for GP's on programs available to support and assist refugees and survivors of torture and trauma	0
	Identify and recall CALD patients with complex care needs. Check care plans, management plans and vaccinations are up to date and if they are eligible for a Refugee Health Assessment (MBS Item 224, 225, 226, 227, 701, 703, 705, 707)	25
	Check the vaccination status of CALD patients and recall for catch-up vaccines through Qld Health Immunisation Program	10
	Clinical audit	3

The 10 most popular activities undertaken are graphed below:



CQI Initiative Learnings (What we learned)

Reasons practices participated in the CQI activity



Feedback from practices

Please note: The Practices who have been named in the sections below have given Brisbane North PHN permission to publish their stories and feedback.

Good News Stories

Practices reported:

- The support of our QI&D Engagement Officers was very valuable and much appreciated
- The project that they first thought was onerous turned out to be easy to implement (Keperra Family Practice)
- Increases in the recording of ethnicity within the practices
- CEH Online modules were well received with staff who access the CEH modules feeling more confident in navigating their interactions with patients of diverse cultural backgrounds
- Having 'country of birth' on the new patient form helps GPs when providing care for the patient (Bray Park Medical Practice)
- Reception/patient relationships have grown with the interest in their ethnic background
- Updating Translating and Interpreting Service (TIS) process and providing staff education about how to use TIS was very helpful (Albany Creek Doctors)
- Health resources available in languages other than English were very well received by patients (Skyarch Medical Clinic Brisbane)
- Practices awareness and usage of Primary Sense increased (Chermside Markets Family Medical Centre)
- Improvement made at the practice would not have been possible without the project and funding
- Asking for ethnicity worked well once staff were confident in asking, the posters were a helpful tool (Taringa 7 Day Medical Practice)
- The posters provided by the PHN about the importance of recording ethnicity in clinical software was a helpful tool
- Processes and changes discussed with the team have now been adopted as business as usual (The Bay Family Medical Practice)
- We achieved a more inclusive and patient-centred environment, leading to improved health outcomes, increased patient satisfaction(Google reviews, reviews in clinic), and stronger community relationships (The Butterfly Clinic)

Practice Learnings

Practices reported some of the following changes or learnings:

- Multicultural resources are now available for all staff and accessible on all computers as well as in a folder in our treatment room (The Keperra Clinic)
- A regular patient always had trouble with her consultations. The practice contacted TIS and this has greatly assisted the consultations. GP is extremely happy (Medicross Hendra)
- Need to explain to patients that an interpreter is free of charge.
- Now able to include CALD patients as a focus area for other CQI initiatives
- Knowledge of TIS among staff was less than anticipated so this proved a great opportunity to target this and address
- Fairly new to using primary sense data but can see the benefits of this and will be using it for further activities we are planning.
- Will continue to update patient demographics and ensure we are checking the details of new patients thoroughly.

Cautionary tales

Some cautionary tales:

- More value would have been added by more time and Brisbane North PHN intervention. A longer project time e.g. 12 months, with quarterly reports reviewed and Brisbane North PHN providing project feedback along the way
- Revise the training modules and perhaps condense it into a shortened course
- Faster way to data cleanse would be good
- One of the barriers was staff feeling uncomfortable asking patients for their ethnicity
- HotDocs online new patient form did not import the ethnicity data into Best Practice
- It was difficult to get started during the Christmas period
- Patients having parents from different backgrounds meant they had to pick and choose and we could be missing vital patient ethnicity that could impact the patients care. Ideally being able to include and family tree with history and ethnicity would likely improve the usability of the data.
- We won't proceed with digital-only forms due to patient population preferences.
- Many patients completed the form online and others just avoided the ethnicity questions on the sheet. Next plan is to work on AMS and see if there is a way to change the settings on what fields are compulsory for the patients fill out
- Primary Sense is limited and PENCAT provided a better source of data.

Next Steps for Practices

Possible next steps for practices could include the following activities (if they have not already done these activities):

- Complete CEH Cultural Competence courses
- Provide Health literacy resources available in languages other than English
- Ongoing Translation and Interpreting training session for staff
- Continue to improve recording of ethnicity, preferred language and country of birth in clinical software
- Identify and recall CALD patients with complex care needs.
- Update new patient registration form to include new ethnicity data fields.
- Information campaign Translating and Interpreting Service (TIS)
- Check the vaccination status of CALD patients and recall
- Information campaign on the importance of recording ethnicity.
- Multicultural health planning session with practice team
- Create a data profile of the practice patient population
- Data cleansing activity
- Update practices processes and procedure document around recording of ethnicity
- Ensure registration of all providers on TIS
- Clinical audit
- Patient survey
- Assign a Multicultural Champion in the practice team
- Update AHPRA and MHR with languages spoken by practitioners
- Identify patients who were born in Australia and who do not require an interpreter
- Promotion of TIS in languages other than English.
- Practice signage (fees, if the practice bulk-bills and after hours care etc) in languages other than English

- Training and information session for GPs on programs available to support and assist refugees and survivors of torture and trauma

Conclusion

In **January 2026** Brisbane North PHN is planning to build on the success of our previous Multicultural Health Initiative by undertaking a Multicultural Children's Health initiative. The initiative will focus on creating bilingual resources that will be made available to parents at the time of the child's 4-year vaccinations. Resources to be created are a school readiness checklist for children and parents and an activity booklet for children (with information for parents) on food and nutrition.

More information on this initiative will be coming soon.