A ‘key worker’ model to improve service pathways for Aboriginal people with dementia in remote Central Australia

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Introduction: The provision of support services to Aboriginal Australians living with dementia in remote communities is complicated by factors such as cross-cultural and language barriers, long travelling distances and often inadequate resources. Poor coordination of services and other problems of service access and lack of service awareness can lead to many unmet needs including delayed assessment and diagnosis. This project builds on a previous research study in the region that highlighted the urgent need for improvements to implementation of recommended service pathways for dementia care. The project aimed to achieve this by developing a model for appropriate ‘case management’ or ‘key worker’ approaches to coordinating.

Method: A qualitative study was conducted in 2013-14 that included six in-depth interviews with key informants and thematic analysis. The researchers used the themes to develop a model which was then validated by a local reference group.

Results: Our data to date have enabled us to develop a model where one ‘key worker’ takes the lead in the assessment and coordination of provision of services with no expectation that they will provide any services outside their own area of expertise.

Implications and conclusion: Significant principles of the ‘key worker’ model include that it is person-centred, culturally safe and contextually relevant. Introduction of the model needs to be accompanied by workforce education so that there is a shared understanding of how care coordination should be implemented ranging from the broad principles (such as culturally appropriate relationships, and service flexibility) through to the more micro elements of the model (such as communication methods between services, record keeping and handover mechanisms). The principles and the process for developing the model are transferrable to other remote service delivery contexts.