

CQI Workshop GCPHN

Wednesday 11th September 2019





Acknowledgement



Gold Coast Primary Health Network would like to acknowledge the traditional custodians of the land upon which we meet today and to pay our respects to elders past present and emerging.



Agenda



All attendees

- 6.30pm 6.35pm: Introductions to GCPHN team
- 6.35pm 7.05pm: An overview of the CQI process
- Small group workshops –CAT 4 & Primary Sense™
- 7.05-8.05pm:
 - All attendees
- 8.05-8.30pm: Reflection, questions, evaluations and close

Whiteboard Session



What do you want to get out of this workshop?









By the end of the workshop participants will have:

- a greater understanding of the CQI process and PIP QI requirements
- increased awareness of data extraction tools available
- increased confidence to define a sample of eligible patients for a CQI activity





Please complete an evaluation throughout this talk!

We value your honest feedback.



Introductions



GCPHN Practice Support Team





















What is The Practice Incentive Program Quality Improvement (PIP QI) Incentive?

- Payment to general practices that participate in quality improvement to improve patient outcomes and deliver best practice care
- The intent of the PIP QI Incentive is to reward general practice for undertaking continuous quality improvement activities (CQI) in partnership with their local Primary Health Network (PHN)
- PIP QI Incentive commenced on 1 August 2019





What do I need to do to register

 Check your practice PRODA access - eligible practices can now register using PRODA through HPOS

Confirm you have access to a data extraction tool



What does the practice need to do once registered

- Advise GCPHN the practice has registered to participate in the PIP QI Incentive
- Provide your local PHN of the PIP Practice Identification Number
- Electronically submit the PIP Eligible Data Set at least once per quarter
- Undertake CQI activities in partnership with your local PHN
- Retain evidence of undertaking CQI activities



Ten Quality Improvement Measures

- 1. Proportion of patients with diabetes with a current HbA1c result
- 2. Proportion of patients with a smoking status
- 3. Proportion of patients with a weight classification
- 4. Proportion of patients aged 65 and over who were immunised against influenza
- 5. Proportion of patients with diabetes who were immunised against influenza
- 6. Proportion of patients with COPD who were immunised against influenza
- 7. Proportion of patients with an alcohol consumption status
- 8. Proportion of patients with the necessary risk factors assessed to enable CVD assessment
- 9. Proportion of female patients with an up-to-date cervical screening
- 10. Proportion of patients with diabetes with a blood pressure result.

phn











4 Steps of CQI





Ask-Do-Describe

*Why do we want to change?

*What do we want to change?

*How much do we want to change?

How are we going to change?

Who are involved in the change? When are we making the change? Where are we making the change

Documents for a CQI project



Process for a CQI project





Minutes of the Best Doctors Surgery general practice team meeting about CQI

Held on 01/08/2019 at 2pm

Held at Best Doctors Surgery

Present Dr Wonderul

Ms Smith [Practice Manager]

Dr Amazing

Mr Kind [Practice Nurse]

Agenda

The main purpose of our meeting was to plan and prepare for undertaking a CQI project. This included reflection on individual, patient and practice priorities and a review of relevant performance data derived from our data extraction tool.

Points for noting The main discussion points of the meeting are summarized in the CQI Project Template (available as a separate document).

Actions

The specific actions, timelines and responsible team members are summarized in the CQI Project Template (available as a separate document).

Next meeting 16/08/2019



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Remove		2019-08-20		29	N	N/A	15	2020-03-03	LNMP
Remove		2019-08-08		23	N (2019-04-09)	N/A	9	2020-04-13	LNMP



Continuous Quality Improvement (CQI) Project Template



An Australian Government Initiative

CQI st	teps	Ask-Do-Describe
		Why do we want to change?
		Gap
		Benefits
		Evidence
		What do we want to change?
		Topic
		Scope
e		How much do we want to change?
Data report one - baseline	18	Baseline
e-b	First CQJ meeting	Sample
t on		Target
loda.		Preparedness
atar		Who are involved in the change?
		Leads
		Contributors
		External
		When are we making the change?
		Deadlines
		How are we going to change?
		Potential solutions
		Select
mplementation		Implement
ment		Record, share
mple		
-		How much did we change?
Data Report		Performance
_ ~	ting	Worthwhile
	Final CQI meeting	Learn
	g	What next?
	Fina	Sustain
		Monitor
		MOTITO



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Filtering	By: Active Pati	ient, C	onditions (D	iabetes - Y	es), Any	Visits <= 1	2 mths, Selec	ted: HbA1c	% (mmol/	mol) (Not re	corded)				
	\$	\$	\$: :	\$		\$	\$	\$	\$	\$	\$	\$	\$
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Mark Patient Name Patient Phone Last Visit

Remove	2019-08-19		30	2019-04-24	N	38	2019-09-23	Ultrasound
Remove	2019-02-19		27	2019-02-19	N	36	2019-10-08	LNMP
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Minutes of the [name] general practice team meeting about CQI

Held on [date]

Held at [venue]

Present [names] + [organization if external to practice]

Agenda The main purpose of the meeting was to review, reflect on and complete the QI activity

Points for noting The QI project successfully achieved all the aims that we set as a practice team. The outcomes are summarized in the CQI Project Template (available as a separate document).

Actions

The reflections of the practice team about the potential value and learning needs and points in relation to the CQI project are summarized in the CQI Project Template (available as a separate document). The team agreed how we will continue to monitor performance in this area and what steps we can take to sustain our performance.

Next meeting [Date or TBC]

STEP 1.

Identify an area for improvement



STEP 2.

Find the best solution



STEP 3.

Implement the solution



STEP 4.

Consider the outcomes

Ask-Do-Describe

*Why do we want to change?

*What do we want to change?

*How much do we want to change?

How are we going to change?

Who are involved in the change? When are we making the change? Where are we making the change

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STEP 3.

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STEP 4.

Consider the outcomes





Break out Sessions 7.05 - 8.05 PM





Useful step by step and overview videos can be found on the pencs.com.au website

Recall CAT

Shared Health summaries

<u>Identify patients with diabetes without HbA1c results recorded in the last 12 months</u>

How to enter an MBS item claimed elsewhere in Topbar

CAT Plus and PIP QI Overview



Resources and user guides

- -PIP QI and CAT Plus
- <u>-CAT 4</u>
- —Top Bar
- -Prompts
- –Recall CAT
- —How to exclude patients



Patient consent to share data

RACGP 5th Edition Standards guidelines for sharing de-identified data:

Page 70 of the RACGP Standards for general practices (5th Ed) refers you to the RACGP's privacy policy template available at https://www.racgp.org.au/running-a-practice/security/protecting-your-practice-information/privacy
This link allows you to access:

- RACGP Privacy Policy Template for General Practices
 - RACGP Patient Privacy Pamphlet Template
- Privacy and Managing Health Information in General Practice

Healthygc webpage







<u>Thursday 19 September - Bowel Cancer</u> <u>Screening and Cancer Council Queensland</u> <u>Information Night</u>

Save the date: Tuesday 8 October – Top Tips for mental health care in general practice- Southport Sharks

<u>Thursday 10 October - Spirometry</u> <u>Training Course</u>

HealthyGC Professional events page







