

## Continuous Quality Improvement (CQI) -

## Children and young people in care

## requiring Health and Developmental

## Assessment’s (1mth, 3mth & Annual)

**Green- Instructions**

**Yellow- add practice detail**

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| **Ask-Do-Describe** |
| **Why do we want to change?** |
| * Gap
 | Low rates of one month [Preliminary Health Check’s](https://www.childrens.health.qld.gov.au/chq/health-professionals/out-of-home-care/), three month [Comprehensive Health and Developmental Assessment’s](https://www.childrens.health.qld.gov.au/chq/health-professionals/out-of-home-care/) and annual [Health and Developmental Assessment’s](https://www.childrens.health.qld.gov.au/chq/health-professionals/out-of-home-care/), completed for children and young people in care. These children have a higher risk of health issues. |
| * Benefits
 | Improved Health outcomes, meet PIP QI requirements, reduce risk, increase efficiency, promote healthy lifestyle, early identification of health care needs to facilitate proactive care. |
| * Evidence
 | Refer to [Health assessment pathway for children and young people in care](https://gcphn.org.au/wp-content/uploads/2020/11/Children-in-Care-Health-Assessment-Pathway-Gold-Coast-1.pdf) or [National Clinical Assessment Framework for children and young people in out-of-home care](https://www1.health.gov.au/internet/publications/publishing.nsf/Content/ncaf-cyp-oohc-toc~ncaf-cyp-oohc-1). |
| **What** do we want to change? |
| * Topic
 | Completion of a one month [Preliminary Health Check](https://www.childrens.health.qld.gov.au/chq/health-professionals/out-of-home-care/) and three month [Comprehensive Health and Developmental Assessment](https://www.childrens.health.qld.gov.au/chq/health-professionals/out-of-home-care/) for children and young people new to care and those in care that have not been previously assessed. All children and young people in care also require annual [Health and Developmental Assessment’s](https://www.childrens.health.qld.gov.au/chq/health-professionals/out-of-home-care/) thereafter. |
| **How much** do we want to change? |
| * Baseline
 | Current % of children and young people in care with a completed Preliminary Health Check, Comprehensive Health and Developmental Assessment, and completion of annual Health and Developmental Assessment’s, thereafter. |
| * Sample
 | Number of eligible patients. |
| * Target
 | Increase the number of completed Health and Developmental Assessment’s for children and young people in care, by 50%. |
| **Who** are involved in the change? |
| * Contributors
 | *Remove/change/add names as required*Practice Manager, CQI Lead, Practice Nurse, Receptionist |
| **When** are we making the change? |
| * Deadlines
 | Define start date *dd/mm/yyyy* and end date *dd/mm/yyyy* Consider your sample size and how long it will take to invite/complete. |
| **How** are we going to change? |
| * Potential solutions
 | * *These are some options you could implement to increase the number of Advance Care Planning (ACP) discussions. Please note you can choose one or more, or add your own, as appropriate for your practice. You do not have to implement all options that are brainstormed/listed*
* Update practice new patient registration form to include living arrangements, carer and child safety contact details. Ensure this information is included in the patient’s records.
* Identify children and young people who are currently living in care and review if they have had a health assessment completed.
* Upload health assessment templates into practice clinical software package.
* Ensure all relevant team members are aware of how to access health and development assessment templates and understand their role within the assessment.
* Ensure all relevant team members are aware of the [Children and Young People in Care Health Pathway](https://gcphn.org.au/patient-care/child-youth-family/children-and-young-people/).
 |
| * Implement
 |  |
| 1. Monitor
 | *A minimum of one QI activity review/touchpoint is required. You can include multiple reviews/touchpoints – list by date. If you have only one review in activity, remove secondary review dates/information that do not apply.* *Review 1 - Date:* *· What is working/not working?* *· Has there been a change in data? If not, why not?* *Review 2 - Date:* *· What is working/not working?* *· Has there been a change in data? If not, why not?* |
| **How much** did we change? |
| 1. Performance
 | *This section is to be completed at end/closure of activity.* *Remove/change/edit as required for your practice.* |
| 1. Worthwhile
 | *Please choose an option or add your own. More detail can be included as required.* *E.g – we believe the effort to complete the activity was worthwhile as we significantly increased the number of ACP discussions.* *OR* *We believe this activity was not worth the effort required, as we did not significantly increase the number of ACP discussions.* |
| 1. Learn
 | *What lessons learnt could you use for other improvement activities?* *What worked well, what could have been changed or improved?* *E.g. SMS reminders result in higher bookings than phone calls.* |
| **What next?** |
| 1. Sustain
 | *Implement new processes and systems into business as usual - which parts of this activity, if any, will you incorporate into business as usual at your practice.* *e.g. Nurses/Doctors will continue to add in the number of ACP discussions given elsewhere by using the ‘not given here’ option and entering the date the patient provides.*  |
| 1. Monitor
 | *Review CAT4 data report monthly/quarterly and initiate corrective measures as required.*  |

See Guide to Completing the CQI Template for more information <https://gcphn.org.au/wp-content/uploads/2019/10/Guide-to-completing-the-CQI-template.pdf>