Continuous Quality Improvement Plan

Practice Name
Date
Topic

Why is Continuous Quality Improvement important?

Continuous Quality Improvement (CQI) activities are actions designed to help practices work better, safer, and smarter. Ideally, **CQI activities are small, incremental adjustments to existing processes that will result in long-term changes that add value to your practice.** Continuous Quality improvement activities boost outcomes for patients by:

- improving practice processes
- improving practice data
- improving patient health outcomes.

In addition to improving patient outcomes and business profitability, general practices have several key reasons to undertake quality improvement activities:

1   Practice Incentive Payment – Quality Improvement (PIP QI)

The PIP QI is an incentive payment from the federal government paid to practices who use data to implement quality improvement activities. The aim of the payment is to improve patient outcomes, measure practice performance and create opportunities for professional development for GP's. PIP QI has 10 Quality Improvement measures:
   1. patients with diabetes with a current HbA1c result
   2. patients with a smoking status
   3. patients with a weight classification
   4. patients aged 65 and over who are immunised against influenza
   5. patients with diabetes who were immunised against influenza
   6. patients with COPD who were immunised against influenza
   7. patients with an alcohol consumption status
   8. patients with the necessary risk factors assessed to enable CVD assessment
   9. female patients with up-to-date cervical screening
   10. patients with diabetes with a blood pressure result.

To be eligible for the payment, practices need to:
- work to improve these 10 quality measures in partnership with their local PHN. Practices may choose to undertake quality improvement activities in another area if these activities are informed by their practice data
- share deidentified data with the Brisbane North PHN.

2   Accreditation

For accreditation practices need to be at (or have processes in place to be working towards) RACGP data standards in the following areas:

- recording of allergy status (accreditation standard is 90%)
- recording of smoking status (accreditation standard is 75%)
- recording of alcohol consumption (accreditation standard is 75%)
- recording of patients BMI (accreditation standard is 75%)
- recording of patient's ethnicity (accreditation standard is 75%)

3   CPD Hours for General Practitioners

RACGP requires General Practitioners to complete 50 hours of continuing professional development per year which must include:

- at least 12.5 hours on educational activities
- at least 5 hours reviewing their performance (reflecting on feedback about their work)
- at least 5 hours monitoring outcomes (using data to ensure quality results).

How do you 'do' Continuous Quality Improvement?

Brisbane North PHN uses the Model for Improvement Framework. This approach asks 3 simple questions:

1. what are we trying to accomplish?
2. how will we know if this change is an improvement?

3. what changes can we make that will result in improvement? This process is referred to as the Plan, Do, Study, Act cycle or PDSA. You plan your activities, implement the changes, study the results, and decide if these changes are working and react accordingly.
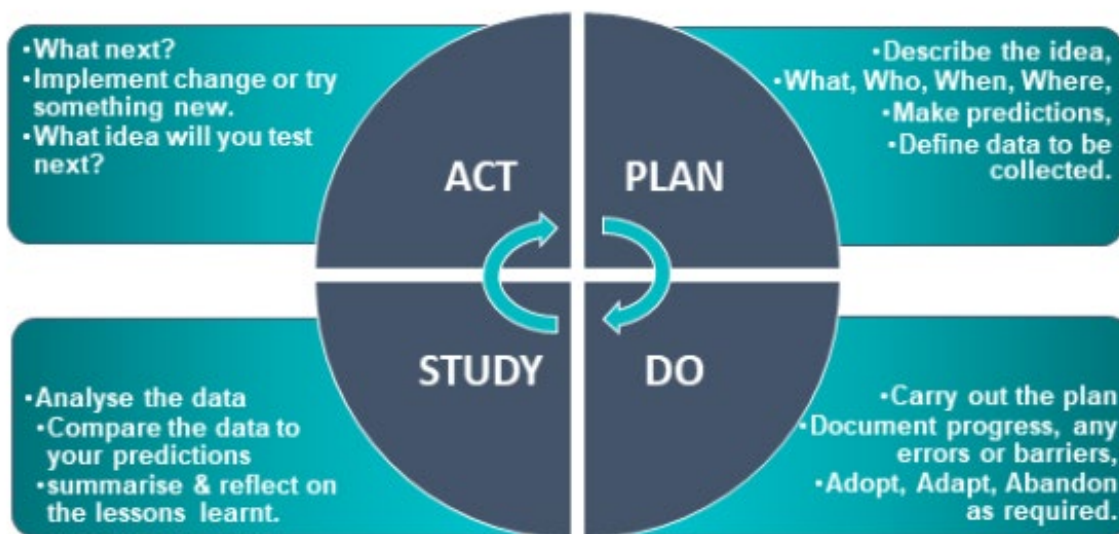
YOUR DETAILS			
Practice name			
Business trading name			
Address			
Phone number		**Email address**	
Clinical software		**Data Collection Tool/s**	
Number of GPs		**Full time equivalent (FTE) GPs**	
Accreditation date		**Accrediting body**	
ABN		**Bank account name**	
Bank account number		**BSB**	

PART 1

Your PHN QI&D Engagement Officer can help you with this – call us if you need help

PLAN DETAILS AND TIMELINES			
Focus area			
Start date		**Finish date**	
Clinical lead		**Practice manager**	
☐ Other GPs ☐ All practice	☐ Practice manager ☐ Health worker	☐ Nurse ☐ Other	☐ Reception staff

WHAT ARE YOU TRYING TO ACCOMPLISH?

What are you trying to achieve/change/do?
Make sure your goals are SMART (Specific, measurable, achievable, relevant, and time-bound)

How does this fit in with your practice quality activities?

☐ Area of interest/practice focus area	☐ PIP QI measure
☐ Process improvement activity	☐ PIP QI - other data driven improvement
☐ Data improvement activity	☐ Accreditation data
☐ Patient health outcome improvement activity	☐ RACGP CPD activity

How can Brisbane North PHN help you achieve this goal?

☐ Goal setting	☐ Training opportunities for staff, RNs, and GPs
☐ Project planning ideas and timelines	☐ Information about external resources
☐ Advice, support, coaching	☐ Networking and buddying opportunities
☐ Practice development training	☐ Additional data
☐ Primary Sense (data tool) training	☐ Other _____
☐ Provision of PHN resources	

HOW WILL YOU KNOW IF THE CHANGE IS AN IMPROVEMENT?

Why are you making this change? How will this change add long term value to the practice?

What does the Primary Sense data tell you now? What other data sources can you access?

PLAN YOUR ACTIVITIES

What changes are you going to try? The Practice Development Matrix can help you with ideas.

1.

2.

3.

4.

IMPLEMENT THE CHANGES
Timelines - when do you want to achieve this by? What are the key milestones?
1.
2.
3.
4.

STUDY THE RESULTS
How (and when) will you measure your progress?
1.
2.
3.
4.
How will you know if you are on track?
1.
2.
3.
4.

PART 2

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DID THESE ACTIONS WORK?
Are things working out as you planned? If not, what are you going to do?
Adopt the changes (Success! How do you make this business as usual)
Adapt the changes (Pivot as needed and keep trying…)
Abandon the changes (Scrap this idea – develop another idea and try again!)

EVALUATION

How did the project go? What does the data tell you now?

What did the Primary Sense (and other) data tell you at the end?

What were the final learnings (the good, the bad and the ugly)?

How can you build on this activity?

What will you try next?

Attach photos, quotes, documents, or data to support your evaluation here.

How will embed this change permanently?

☐ Signs	☐ Staff training session
☐ Document work practices	☐ Update position descriptions
☐ Update policy and procedures manual	☐ Staff Induction
☐ Other _____	

Did the activity add value?

How much value did the CQI activities add to your practice?

☐ No value	☐ Little Value	☐ Neutral	☐ Some Value	☐ Significant value

How confident are you about trying future CQI activities?

☐ Not confident	☐ Neutral	☐ Slightly confident	☐ Fairly confident	☐ Very confident

What would have made these activities more valuable?

Spread the news!

How will you feedback to staff?

How will you celebrate your success? (e.g. morning tea, practice newsletter, website)

Do I have good news stories to share?

Do I have cautionary tales to share (information from not-so-great things is still important learning)

How could Brisbane North PHN have further helped me in this activity?

SIGNATURES/APPROVALS

Brisbane North PHN may use your feedback in our communications including PHN publications, website and social medica channels. Do you grant permission for us to share your stories, quotes, photos, and other feedback?

☐ Yes, you may use my feedback and attribute them to my name/practice

☐ Yes, you may use my feedback anonymously

☐ No, I do not give permission.

Project lead	Preferred email for project communication*	Date
GP lead	Preferred email for project communication*	Date
PHN QI&D Engagement Officer	Preferred email for project communication*	Date

* Email addresses provided will be used for project communication only.