

Inspire. Empower. Improve. 

Quality Improvement in Primary Healthcare

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Improvement Foundation

- Not for profit
- Adelaide based
- Established 2006
- Quality improvement – worked with thousands of health services
- www.improve.org.au



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Learning Objective

- Explain quality improvement and its relevance to the primary health care sector

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Evolution of QI in primary health care

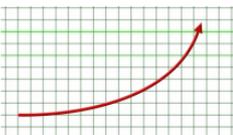
- 1992: Introduction of Divisions of General Practice
- 1995: Introduction of CDM Medicare item numbers
- 1998: RACGP Accreditation
- 1998: Introduction of the PIP scheme
- 1999: Introduction of the EPC Program
- 2002: Funding for PNs
- 2010: First National Primary Health Care Strategy
- 2011: Medicare Locals
- 2015: Primary Health Networks
 - ❖ 2019: PIP Quality Improvement Incentive



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QI is on an upward trajectory

- Accreditation: 5th standards (a module on QI)
- My HR: Shared Health Summaries
- PIP Quality Improvement Incentive



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Accreditation QI Standard 1 – Quality Improvement

- Our practice undertakes quality improvement activities to support the quality of care provided to our patients.

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Accreditation: QI Mandatory Indicators

QI1.1 B Our practice team internally shares information about quality improvement and patient safety.

- **You must: have a system to identify quality improvement activities.**

QI1.3 B Our practice uses relevant patient and practice data to improve clinical practice (e.g. chronic disease management, preventive health).

- **You must: show evidence that you have conducted a quality improvement activity, such as a PDSA cycle or clinical audit, at least once every three years.**

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PIP Quality Improvement Incentive

- Designed to simplify administrative burden
- Provides flexibility for practices to focus on chosen area/s of need
- Use of information (ie. data) to drive quality and patient centred care
- Payments will support achievement of high quality care and improved patient outcomes
- In time, practice will be paid for demonstrating data driven quality improvement

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Exercise – What is Quality?

In your team:

- > Discuss the question "What is Quality?"
- > Write down ideas
- > Add some notes in the chat pane



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What is Quality?

"Define in terms of customer satisfaction"



W Edwards Deming

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What is Quality?

- A system, process and practice that delivers a product, or service to a customer
- Means delivering efficient systems, which converts to saving time, money or increased profits
- Meeting or exceeding a customers/clients expectations



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Quality can be Subjective

- Quality of a product or service refers the degree to which the product or service has been perceived to meet the customer's expectations.
- Quality has no specific meaning unless related to a specific function and/or object.
- Quality is a perceptual, conditional and somewhat subjective attribute.



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Three Dimensions of Quality

- **Client** quality
 - What clients and carers want from the service
- **Professional** quality
 - Service meets needs as defined by professional providers and referrers
 - Service correctly delivers techniques and procedures necessary to meet needs
- **Management** quality
 - Most efficient and productive use of resources within limits set by higher authorities / purchasers

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What does quality mean in healthcare?



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Quality of care

Doing the right thing, at the right time, in the right way, for the right person—and having the best possible results

Delivering the right care for every person every time



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What is Quality Improvement (QI)?

A formal approach to the analysis of performance and systematic efforts to improve it.

“The combined and unceasing efforts of everyone to make the changes that will lead to better patient outcomes (**health**), better **system** performance (**care**) and better professional development (**learning**)”.



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What is Quality Improvement?

- Reducing waste
- Increasing productivity (increased yield, less effort)
- Improving outcomes for people (health, social, educational)
- More reliability
- Working smarter, not harder
- Reduce risk / adverse events



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Where do you start in your QI journey?

- Know you need to improve
- Feedback mechanisms
- Effective Change
- Testing that change
- Knowing when to implement



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What is Continuous Quality Improvement (CQI)?

A system of regular reflection and refinement to improve services, processes and outcomes that will provide quality health care 



- Improve consistently and forever
- It's a matter of philosophy
- Born of attitude
- Cyclical ongoing approach
- Culture of improvement

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Continuous Quality Improvement



- CQI involves having systems in place to constantly review work processes
- CQI involves understanding every activity that takes place in an organisation.
- Staff commitment

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Why CQI?

A business or organisation will never realise their full potential until improvement becomes part of every worker's day job, rather than a temporary phenomenon

Batalden P, Davidoff F. What is "quality improvement" and how can it transform healthcare? Qual Saf Health Care 2007;16:2-3

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Why CQI?

- To do better, to thrive
- To be proactive
- Remain at the forefront of external changes
- Protect against risks
- Increase efficiency
- Improve the bottom line

All while making staff and customers happier



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Who is responsible for Continuous Quality Improvement?



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How could CQI be applied to primary health care?



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How could CQI be applied to primary health care?

- Improving access to services 
- Improving patient outcomes & population health 
- Reducing risk 
- Improving integration of services 

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How could CQI be applied to primary health care?

- Improving patient and staff satisfaction 
- Increasing productivity 
- Improving staff professional development 

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CQI Commitment

- CQI involves planning, organising and understanding each and every activity that takes place in the organisation
- Staff must be committed to continuous improvement because its success depends on input from all individuals
- Changes to activities affect staff which has effects on others

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What is a system?

A system is “a network of interdependent components that work together to accomplish a shared aim”



- Every system has an aim (no aim, no system)
- Every system must be managed
- Management requires “knowledge of the interrelationships between all the components within the system and the people who work in it”

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Why is an understanding of ‘systems’ important in health care?

- A system view is critical to understanding patient outcomes, safety, and quality
- Clinician action alone is often not sufficient to improve health outcomes
- When we have a preoccupation with system **elements**, the system as a whole, and its effect on patients, remains invisible



“Every system is perfectly designed to get the results it gets”

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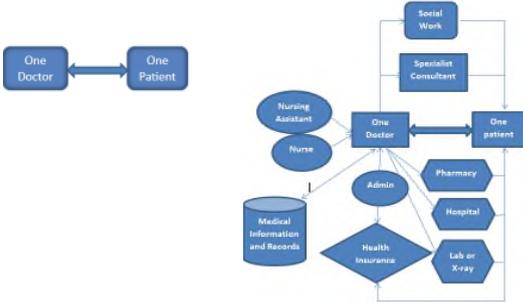
Different levels of the health system



- Personal level
- Microsystem level: e.g. general practice, AMS
- Meso-level: regional: e.g. LHD, PHN
- Macro-level: national and state policy

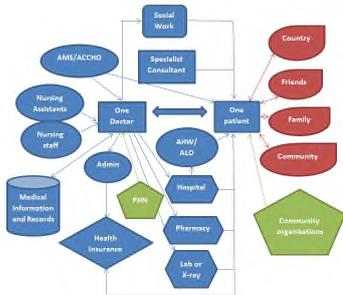
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From a 1:1 to a systems approach



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More systems to consider....



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Systems thinking

- Systems thinking provides a framework for looking at relationships between parts of the system and how they connect, rather than separate activities as disconnected, individual parts.

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Improving Quality in your Organisation

- Set clear, achievable, communicated goals for quality performance
- Monitor and evaluate performance
- Collect and analyse, process data
- Develop a quality oriented culture
- Ensure employees check the quality of their work
- Constantly identify and diagnose quality problems
- Take appropriate action to overcome quality problems
- Check that improvements are succeeding
- Search for new improvement areas

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And remember...

Not all change is improvement, but all improvement is change.

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Questions?



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Upcoming Webinars



- Model for Improvement**
 - Tuesday 30th July 2019 @ 12.30pm and repeated at 6.30pm
- Measuring for Improvement**
 - Tuesday 13th August 2019 @ 12.30pm and repeated at 6.30pm

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