



CENTRAL QUEENSLAND, WIDE BAY,
SUNSHINE COAST PHN

BUILDING THE HEALTH SERVICE TEAM

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CENTRAL QUEENSLAND,
WIDE BAY, SUNSHINE COAST

An Australian Government Initiative

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Contents

• Involving your team in QI.....	3
• The benefits of effective team members.....	5
• Characteristics of a high-performing team.....	5
• Working with your team - Team Checklist.....	6
▪ Involve the whole team (Planning).....	6
▪ Educate the team (Information, awareness, capacity, skills).....	6
▪ Ensure team members have protected time to complete tasks (Resourcing).....	6
▪ Set realistic goals and use data to drive improvement (Goals).....	7
▪ As a team, regularly reflect, review and adjust what you are doing (Reflection).....	7
◦ Roles and Responsibilities within Health Service Teams...	8
▪ General Practitioners/Practice Owners.....	9
▪ Practice Nurses.....	9
▪ Practice Managers.....	10
▪ Reception Staff.....	10
◦ Set clear goals.....	11
◦ Professional development.....	12
◦ Engage the team.....	13
▪ Model for Improvement Example - Engage the team.....	14
◦ Communication.....	15
◦ Reflect on team effectiveness.....	16
◦ Team Health Check - How effective is our team?.....	17



Relevant Accreditation Indicator

Where activities in this resource would contribute to achieving accreditation under the Standard for general practices (5th edition), we have mentioned the relevant indicator

INVOLVING YOUR TEAM IN QI

This toolkit is intended as a guide to demonstrate how quality improvement can be used to improve health service team capacity and capability. General practice is a complex environment and therefore you should test any system changes that you are planning to make using the Model for Improvement and plan, do, study and act (PDSA) cycles.

PLANNING FOR IMPROVEMENT

Ideally, before embarking on your quality improvement journey, you will engage your team and seek agreement to focus on a particular area for a period of time. This is best documented in a Quality Improvement Plan.

A Quality Improvement Plan is a valuable document for guiding your quality improvement work and keeping your effort focused. If you do not already have a Quality Improvement Plan, please refer to the 'Continuous Quality Improvement Fundamentals' module.

Where to start your improvement activities

By this stage you should have in place:

- commitment from your team to be involved in quality improvement
- a Quality Improvement Plan with:
 - a clear aim
 - measures (about 3) to guide your work over the next year
 - high level strategies, ideas or tactics for change
 - identified members of the quality team or at least a coordinator for the Quality Improvement Plan
- protected time to carry out essential coordination activities.

System Changes vs Tasks

Some of your change ideas will be task orientated, whereas others will relate to system change.

Tasks

These are generally actions that can be undertaken, such as data cleansing activities, but are not really a change to a process or system. The system change will come after you have a current and accurate register of patients coded with diabetes, for example.

System Change

System change (or process change) is where you will seek to change the way people (staff, patients or suppliers) routinely behave. For example, the way your organisation/staff routinely ensures that all patients coded with diabetes have HbA1c testing undertaken every year.

Identifying which of the change ideas (as they come up) is a task and which is a system change, will help you determine whether you use the Model for Improvement (to test a system change) or if it's a task, undertaking it at the appropriate time.

Change Ideas

When making changes to your systems, it is advised that you make small changes over time in a planned and coordinated way. The following pages contain a checklist, as well as a number of change ideas, that are designed to assist you to build the team's confidence and capability. The change ideas are not intended to be implemented at once, or necessarily in the order below. It would be best to start on just one change idea that is most suited to your team.

Model for Improvement examples are also provided, where appropriate, to help you understand how to break change down into small, incremental steps and ensure that the change is an improvement before scaling or implementing.



The benefits of effective teams

Effective teamwork is vital to support the delivery of quality care and to ensure patient safety. Developing a high performing team is not only a predictor of success in quality improvement, it also builds staff morale and job satisfaction.

All members of the practice team need to have input into improvement areas relating to care provision and to contribute to activities to achieve those goals. Each administrative and clinical member of the team is likely to have a different set of skills and knowledge, and it is the combination of all these perspectives that produce a positive outcome. By drawing on everyone's experience, you will create the best possible care.

Characteristics of high-performing teams

Engaged and effective health service teams are the absolute foundation for achieving sustainable improvements. Experience has shown that building the team's engagement and commitment to quality improvement work is often overlooked, and this can become a weakness that affects the ability for health services to achieve sustainable change.

If you want to improve outcomes for your health service, you will need to change what you are doing. It's important not to assume that the benefits of these changes will be understood or accepted by everyone. Facts are usually not enough, you need to get the "hearts and minds" on-side for real engagement and enthusiasm.

Successful teams have:

- A clear set of shared goals
- Effective leaders who are committed to support the team's goals
- Well defined roles, so that everyone understands what they should do and can work interdependently and without overlap or gaps in responsibility
- Effective processes for discussion, decision making and communication
- Members who 'feel' like they are part of a team and have a sense of belonging and sharing.

Working with your team - Team Checklist

Involve the whole team (Planning)

- Does our health service have a QI action plan that is developed in partnership with the whole team?
- Do we have clinical and non-clinical leaders (e.g. our principal clinician and Practice Manager) driving quality improvement activities?
- Have we assigned roles, responsibilities and timeframes for carrying out planned improvements, as listed in the QI plan?

Educate the team (Information, awareness, capacity, skills)

- Does our whole team have a good understanding of the goals of the health service, including the need to undertake continuous quality improvement activities?
- Does our health service have a good understanding of the practice population and the areas of high need?
- Does our health service have documented QI processes that can demonstrate participation in continuous quality improvement activities?
- Do our team members have the QI skills they need, or is more training required?

Ensure team members have protected time to complete tasks (Resourcing)

- Have we assigned people realistic tasks in light of any resource or time constraints?
- Have team members been given “protected” time to regularly complete tasks?

Set realistic goals and use data to drive improvement (Goals)

- Are our goals SMART: Specific, Measurable, Attainable, Relevant and Time-bound?
- Can we measure progress against our goals?
- Are we using data to frequently review progress against our goals?

As a team, regularly reflect, review and adjust what you are doing (Reflection)

- Is reviewing progress against our goals and generating new ideas part of our regular team meeting agenda?
- Are we regularly adjusting our goals and strategies where required?
- Are we working as a team to problem-solve any challenges?
- Are we rewarding and acknowledging and rewarding success?

ROLES AND RESPONSIBILITIES WITHIN HEALTH SERVICE TEAMS

Consider how your health service team currently operates. Is your team working together effectively and efficiently? It's not unusual for health service teams to be working in silos, which can lead to gaps, errors, assumptions, duplication and other inefficiencies. To achieve sustainable improvement, you will likely need to focus on achieving a whole of team approach to undertaking continuous quality improvement activities.

A key starting point is to allocate continuous quality improvement roles and responsibilities to team members. Documented role clarity is of high importance to ensure efficiency and accountability. Below is an example of how responsibilities could be shared across the health service team. As there is much diversity between health services, consider what will work best for your team.



Do you have the right staff, doing the right job, at the right time?

On the following pages we've listed examples of possible role based activities relating to undertaking continuous quality improvement activities. However, it is important that your team discusses the range of actions or tasks that are needed to make sure that your health service team is provided with sufficient resources, including upskilling and protected time, to undertake continuous quality improvement activities. Following this, determine, based on comparative advantage, which role(s) in the team is best placed to undertake which action(s).



Relevant Accreditation Indicator

Criterion C3.2A All members of our practice team understand their role in the practice.





General Practitioners / Practice Owners

- Provide effective and consistent leadership
- Engage the whole team in quality improvement planning
- Communicate the vision for improvement, and the practical first steps, to the whole team
- Drive the creation of a quality improvement team
- Ensure regular team meetings include a review of CQI activities (monitor progress over time)
- Provide resources, including protected time and relevant staff training
- Encourage and support the provision of improvement ideas from the whole team
- Analyse and review clinical and business data
- Select key priority areas, based on analysis of the data, in consultation with the team
- Implement a team based process to ensure data are complete, accurate and timely, including clinical coding
- Celebrate improvement achievements with the team



Practice Nurses

- Contribute to the quality improvement planning process
- Assist in the development of the vision for improvement, and the practical first steps
- Participate in, or engage with, the quality improvement team
- Request required resources, including protected time
- Undertake relevant training and upskilling, if required
- Encourage and support the provision of improvement ideas from other team members
- Analyse and review relevant clinical data
- Select key priority areas, based on analysis of the data, in consultation with the team
- Implement a team based process to ensure data are complete, accurate and timely, including clinical coding
- Monitor progress against quality improvement goals and measures regularly



Practice Managers

- Participate in quality improvement planning
- Assist in the development of the vision for improvement, and the practical first steps
- Participate in, or engage with, the quality improvement team
- Request required resources, including protected time
- Undertake relevant training and upskilling, if required
- Analyse and review relevant business data
- Suggest key priority areas based on the data analysis
- Monitor progress against quality improvement goals and measures regularly
- Implement a team based process to ensure data are complete, accurate and timely, including clinical coding
- Undertake audits of health service records to identify specific patient groups in need of follow up / proactive care
- Establish and oversee recall/reminder systems
- Support GPs with the flow of information to, and from, other health care providers
- Manage MBS billing, PIP QI, the upcoming Workforce Incentive Program (WIP) and other payments
- Support/manage reception staff responsibilities
- Manage succession planning
- Document policy and procedures for the delivery of consistent, proactive care



Reception Staff

- Contribute to the quality improvement planning process
- Participate in, or engage with, the quality improvement team
- Request required resources, including protected time
- Undertake relevant training and upskilling, if required
- Contribute to the team process to ensure data are complete, accurate and timely.

Ideas for Improvement - Roles and Responsibilities

- Carry out a skills audit within your health service to identify any skill gaps or staff areas of interest and strength
- Update your position descriptions to include quality improvement and identify a staff member with responsibility for overseeing CQI in your health service
- Include information on continuous quality improvement in your induction packs for new staff members

Set clear goals

Before setting specific goals for targeted quality improvement activities, for example, improving care for patients with COPD, the overarching direction and objectives of your health service should be clear. This is often documented in a strategic plan or practice action plan. It is important to ensure any quality improvement goals are consistent with your health service's strategic plan.

The goals for your team may be influenced by analysis of data on your patient population, input from the team, feedback from the patients or a new opportunity.

Whatever goals you settle on, they should fit your organisational objectives, address the health needs of your patients and be a significant contribution to best practice care.



Relevant Accreditation Indicator

Criterion C3.1A Our practice plans and set goals aimed at improving our services.



A practical approach to setting and implementing specific goals is described in < **A model for implementing Continuous Quality Improvement Fundamentals**

Example - SMART Goal Quality Improvement Action Plan

Over the next year, 90% of our health service staff will complete a Model for Improvement in their area of interest.

Example - SMART Goal Model for Improvement

During the next week, 100% of our staff will identify a change idea to improve the process and/or experience for patients who attend our health service.

Professional development

You may identify gaps in skills in the process of setting goals and defining roles. Staff should be supported to develop their skills and competencies so they can perform their role, as well as feel confident to inject new ideas and add to the service's ability to provide the best care.

It is also important that staff are supported to develop on the job and get the encouragement and mentoring they need so that they feel comfortably challenged and extended.

It is worth developing a policy to have a consistent approach to supporting staff professional development taking into account:

- Time off to attend training
- Payment or co-payment of the training costs
- Online courses
- Formal qualifications
- Discussing and documenting personal development plans.



Relevant Accreditation Indicator

Criterion C8.1A Our non-clinical staff complete training appropriate to their role and our patient population.

Criterion GP3.1A Members of our clinical team:

- actively participate in continual professional development (CPD) relevant to their position and in accordance with the legal and professional organisation's requirements.

Criterion GP3.1C Our clinical team is train to use the practices' equipment that they need to properly perform their role.

Ideas for Improvement - Professional Development

- Research appropriate training opportunities being held during the coming year for all staff
- Identify and allocate an appropriate professional development budget and document this in a policy
- Ask staff to apply for professional development activities based on their skills and role within the practice
- Identify 'in-house' skills that can be used to provide training to other staff members
- Create an 'in-house' mentorship program where senior or more experienced staff partner with new staff members



Subscribe to GP Matters for a weekly update of local professional development opportunities.

Engage the team

It is important that your team feels committed to the health service's goals. There are several strategies to enthuse your team to participate in the change process:

- **Explain the health outcomes** you want to achieve and the steps in the change process. Members of your team will engage more with the process if they understand why it is important and can appreciate the anticipated benefits for patients and the practice.
- **Involve your team** in developing and implementing ideas and consult staff who are directly affected. Staff need to feel that their input is valued for the whole team to be engaged in quality improvement. Relying on the knowledge and experience of your team will also lead to better decision making.
- **Provide feedback** to keep people on track and enthusiastic.
- **Monitor progress** both formally and informally by reviewing outcomes for each milestone and checking in regularly with individuals, as well as providing them with support to problem solve difficult issues.
- **Set realistic expectations** of staff and the demands you place on them.
- **Equip the team** with the tools, training and workspace they need to perform their roles.
- **Be approachable**, whether that means having an 'open door' or setting aside time when you are available.
- **Celebrate all your milestones**, acknowledge a job well done and reward excellence. Small acts of recognition, thanks and celebration contribute significantly to staff morale and demonstrate to all staff that their input is not only being noticed, but also valued.



Relevant Accreditation Indicator

Criterion Q1.1C Our practice seeks feedback from the team about our quality improvement systems and the performance of these systems

Ideas for Improvement - Engage the Team

- Display your CQI goal and progress graphs in the lunch room for everyone to see.
- Create some friendly competition amongst staff members to increase motivation. For example, providing a small gift, e.g. a bar of chocolate, to the practice nurse who completes the most diabetes risk assessments in one week.

Model for Improvement Example - Engage the Team

Q1. What are we trying to accomplish?

GOAL: To, improve the health service culture so that all team members understand, and contribute to CQI activities.

Q2. How will we know we've improved?

MEASURES

- Team members undertake Continuous Quality Improvement activities using the Model for Improvement (MFI)
- Undertake a verbal survey before and after interventions

Q3: What changes can we make that will lead to an improvement?

IDEAS:

- Invite enthusiastic team members to participate in CQI projects
- Upskill team members in QI methodology and tools
- Engage in CQI collaborative projects
- Regularly invite team members to engage in possible CQI activities
- Regularly survey patients/clients on CQI activities to gain their feedback
- Develop a team social club
- Start a "Rate You Day" board
- Display CQI projects on team noticeboard

Communication

Each team member requires all the information they need to do their job. A structured and formal communication process ensures everyone can access the information they need.

Team meetings should be:

- **Regular** and set on a predictable schedule **several months ahead**
- **Frequent enough** to enable your team to produce results and feel supported. Weekly meetings generally work to keep people informed and engaged.
- **Well managed**
Agendas should be shared in advance, minutes taken and action items noted to ensure follow up within the agreed timeframe.
- **Conducive to contribution and information sharing**
People need to get valuable information and updates and sufficient time should be allocated to the important agenda items that require discussion.
- **Create trust**
Information is shared fairly and openly.

It is important to take into account the ramifications of holding staff meetings in, or, after hours.

In-hours meeting

- Will you close the practice?
- Who will answer the phone?
- Will GPs stop consulting?

After-hours meeting

- Will staff be paid or have time off in lieu?
- Is this family friendly?
- Will staff be too tired?



Relevant Accreditation Indicator

Criterion C3.4A Our practice team has the opportunity to discuss administrative matters with the principal practitioners, practice directors, practice management, or owners when necessary

Criterion C3.4B Our practice encourages involvement and input from all members of the practice team.

Criterion C3.4C Our clinical team discusses the practice's clinical issues and support systems.

In addition to meetings with action items, it is important to consider the right systems for communication day-to-day. Whether your team has a combination of notice boards, pigeon holes, digital communications and/or in-person catch ups, it has to ensure people get the information they need to provide safe, timely and effective care

Ideas for Improvement - Communication

- Regularly update your health service team on your CQI activities through a newsletter or noticeboard
- Include CQI initiatives and activities as an agenda item at your staff meetings.

Reflect on team effectiveness

Team members will feel valued if they experience effective and constructive reviews of their work and how it contributes to the success of the practice. This feedback helps to motivate staff and improve individual and overall practice performance.

Reflection can be as simple as considering your mutual responses to the following questions for any given task or objective:

- Is reviewing progress against our goals and generating new ideas part of our regular team meeting agenda?
- Are we regularly adjusting our goals and strategies where required?
- Are we rewarding and acknowledging success and working as a team to problem-solve any challenges?

You may wish to get feedback from your staff using the structured survey (see page 17)

Ideas for Improvement - Reflect and Review

- Complete the Team Health Check and review the results to identify an area for improvement.
- Implement a 'fussy board' - thank-you, well done and what has worked well
- Celebrate the wins!
- Celebrate achievements, staff birthdays, different cultural festivals, and provide 'spot rewards', e.g. movie tickets or a dinner voucher in recognition of members who have gone above and beyond the call of duty on a particular issue
- Facilitate social events
- Establish an award (e.g. department store voucher, dinner at a restaurant) for high quality patient care and responsiveness, or for living the behaviours and values adopted by your general practice or health service
- Establish team 'traditions'. Ideas could be as broad as everyone pooling funds and sharing a lunch every time the general practice or health service achieves one of its milestones, or when a team member celebrates a personal or professional achievement
- Once a quarter, extend the team meeting to a dinner or some other type of social event, such as bowling, movies, wine tasting, trivia, etc.

Team Health Check - How effective is our team?

Setting Goals	1 Strongly disagree	2 Disagree	3 Neither agree or disagree	4 Agree	5 Strongly agree
1. The goals of the practice are clearly stated and have been communicated to all team members.					
2. The goals of the practice include specific standards relating to patient care.					
3. Everyone who works in the practice share the same goals.					
4. Everyone shares the same standards in patient care and work ethic.					
5. Each individual in the practice is clear about the requirements of their role and how they contribute to the collective goals of the practice					

Engaging the team	1 Strongly disagree	2 Disagree	3 Neither agree or disagree	4 Agree	5 Strongly agree
1. The practice leaders are interested in the team member's suggestions for improving the effectiveness of the practice.					
2. Team members are given the opportunity to make and contribute ideas to the ways the practice is run.					
3. All team members are treated with respect and dignity.					
4. Team members are provided with regular feedback on the progress the practice is making to achieve it's goals					
5. Team member's effort and good performance is acknowledged and recognised.					

Assign roles and responsibilities	1 Strongly disagree	2 Disagree	3 Neither agree or disagree	4 Agree	5 Strongly agree
1. All tasks required to keep the practice running smoothly have been identified and are allocated to individuals.					
2. All team members are aware of how their tasks impact on others					
3. The practice has contingencies in place to deal with crises or ad-hoc situations.					
4. Team members have sufficient knowledge of each other's work to cover for colleagues on leave.					
5. Team members are clear about the parameters of their role and know which decisions they can make and which they need to refer and to whom.					

Communication	1 Strongly disagree	2 Disagree	3 Neither agree or disagree	4 Agree	5 Strongly agree
1. The practice has regular team meetings.					
2. Team meetings are organised and conducted using a specific agenda.					
3. There are clear and well established communication channels for keeping all the team members (including part-timers) informed of changes.					
4. Team members know who to go to when they encounter problems in performing their work.					
5. The practice has an established channel for communicating with patients.					

Reflect and review	1 Strongly disagree	2 Disagree	3 Neither agree or disagree	4 Agree	5 Strongly agree
1. The practice has an established process for reviewing newly implemented procedures					
2. There is an established process for monitoring and reviewing teeam performance.					
3. There is opportunity and a process to learn from mistakes and to use this information to improve overall effectiveness and efficiency.					
4. The practice seeks the input of patients in improving the provision of services					