# PRACTICE SUPPORT FOR THE FUTURE

What is our aim:

- Support the Practices moving towards becoming a High Performing General Practice

- Look at implementing the 4 foundational building blocks

- provide monthly resource packs

- general practice support – reactive – email and phone support

- Set-up small

Working towards
The Healthcare Home Model
or
High Performing General Practices

The Building Blocks are:
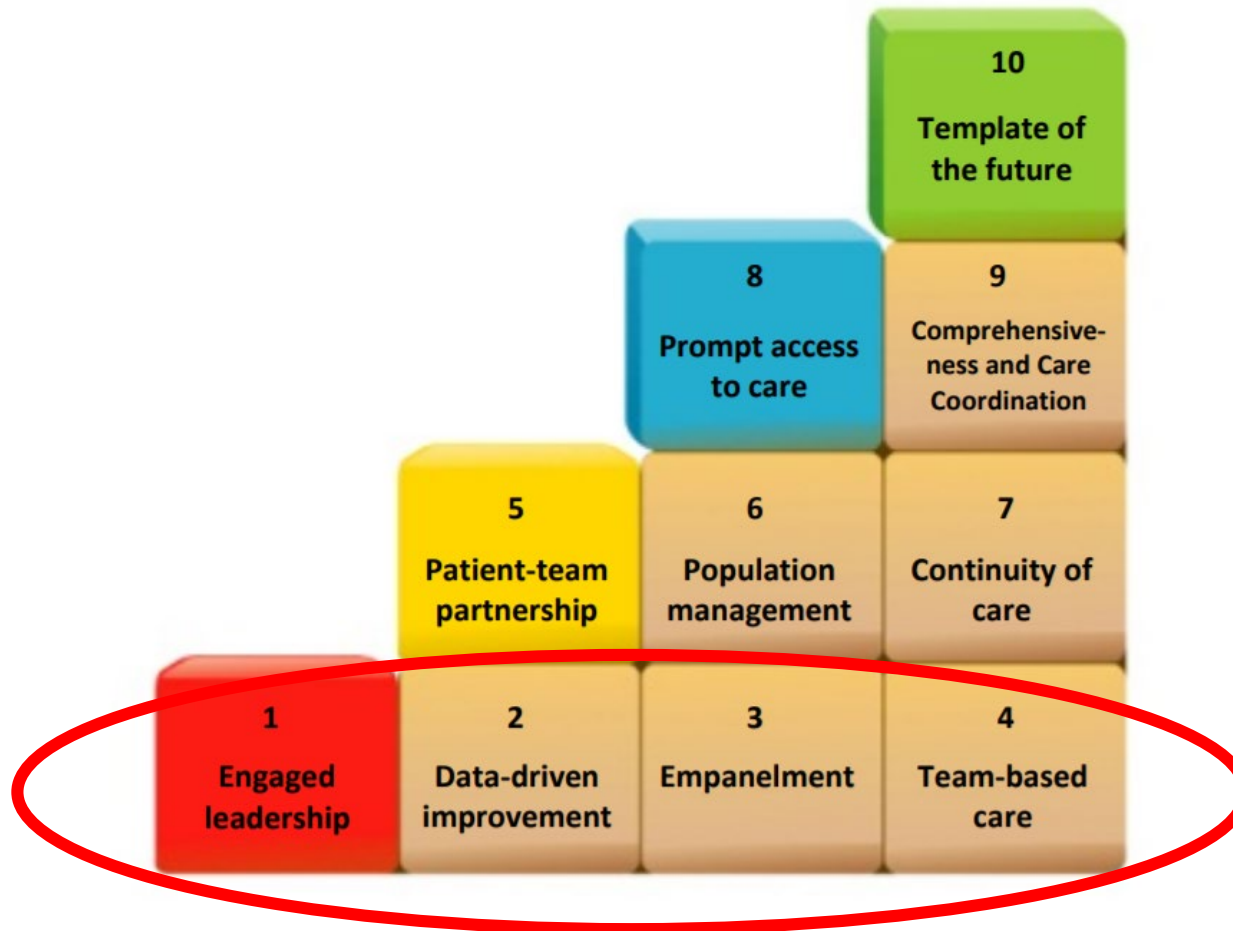
Building Block 1 – Engaged Leadership

➢ Clinical Leadership and Team Leaders – (who are the leaders in the Practice)

➢ Quality Improvement (incorporating LEAN thinking) – PDSA's

➢ Privacy Principles and compliance

➢ Ongoing Staff Education

➢ Clinical Governance Framework and Clinical Handover

➢ Consistent Medical Records

➢ Risk Management

➢ Practice Management through leadership

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Engaged leadership

CLINICAL LEADERSHIP –

Building Block 1 of High Performing General Practice

Description

Encourage the Practice to identify a GP with the designated role of "Clinical Leader".

The clinical leader will be engaged in the process of leading change within the Practice environment through the use of clinical data and will develop a systematic approach to monitoring, managing and improving safety by taking a team-based approach. It is encouraged to enlist leadership at all levels of the Practice including but not limited to the reception team, nursing team, and general practitioner team.

The Practice can also engage patients in leadership roles calling upon them as experts in the healthcare experience to identify priorities for improvement.

This model will assist the Practice in achievement towards accreditation and provide the first foundational building block to becoming a high performing general practice. Outcomes for this model are as follows:

- Identification of clinical leadership
- Identification of team leaders
- Implement practice meetings as relevant to practice
- Process for documenting quality improvement
- Understanding of the Privacy Principles and importance of confidentiality
- Education program for practice staff
- Implementation of a Clinical Governance Framework
- Implementation of systematic processes for the management of conditions affecting patients and clinical handover
- Implementation of Practice Information Sheet
- Registered for PIP and SIP
- Improvement in patient health record documentation
- Systematic process for registering patients to My Health Record
- Systematic process for uploading Shared Health Summaries and Event Summaries to My Health Record
- Implement a written process for recording follow-up of near misses, mistakes and incidents
- Implement a Risk Management Plan for the practice

As part of the RACGP Standards for General Practice – 4ᵗʰ Edition and the Interpretive Guide to the RACGP Standards for General Practices 4ᵗʰ Edition for Aboriginal Community Controlled Health Services this model works towards your Practices achievement against: -

- Criterion 1.2.1 – Practice Information
- Criterion 1.4.1 – Consistent evidence based practice
- Criterion 1.4.2 – Clinical Autonomy for General Practitioners
- Criterion 1.5.2 - Clinical Handover
- Criterion 1.7.1 – Patient Health Records
- Criterion 1.7.2 – Health Summaries
- Criterion 1.7.3 – Consultation notes
- Criterion 3.1.2 – Clinical Risk Management Systems
- Criterion 3.1.3 – Clinical Governance
- Criterion 3.2.1 – Education and training
- Criterion 4.2.1 – Confidentiality and Privacy of Health Information

Relevant tools to assist in creating these measurable goals and objectives will be:

- RACGP Standards for General Practice – 4ᵗʰ Edition
- Interpretive Guide to the RACGP Standards for General Practice – 4ᵗʰ Edition for Aboriginal Community Controlled Health Services
- Agpal or GPA website Qbay
- RACGP Practice Management –
  - Module 6 – Practice Teams and Leadership
  - Module 9 – Managing Information
  - Module 10 – Managing quality
  - Module 12 – Clinical Governance
- RACGP Handbook for management of health information in general practice – 3ʳᵈ edition
- RACGP Privacy Policy template
- RACGP Patient Privacy pamphlet template
- Medical Board of Australia – Good Medical Practice: a code of conduct for doctors in Australia
- Dept. of Human Resources website – Practice Incentive Program –
- https://www.humanservices.gov.au/health-professionals/services/medicare/practice-incentives-program
- Western NSW PHN Practice Support Team
    - Activity 1 – PDSA writing
    - Activity 2 – 5S methodology (LEAN)

CLINICAL LEADERSHIP QUESTIONAIRE

1. Clinical & Team Leaders/Designated Role/Meetings

Do you have a clinical leader for the Practice? *PSO - (If a Practice is accredited – the will already have a designated person with the role and responsibility of clinical leader – they may need to just review what they said for accreditation – they may like to amend this person and re-allocate this role)*	☐ Yes ☐ No ☐ Further Support ☐ N/A
Does your Practice hold regular meetings? *PSO - (note below the types of meetings the Practice may hold)*	☐ Yes ☐ No ☐ Further Support ☐ N/A
What types of meetings does your Practice hold and what is the frequency for these meetings? ☐ Management meetings - _____ ☐ Clinical meetings - _____ ☐ Quality Improvement meetings - _____ ☐ Receptionist meetings - _____ ☐ Full team meetings - _____	
Does your Practice have a staff member that is designated with the Roles and Responsibilites as per accreditation guidelines for: ☐ Criterion 3.1.3 A Clinical Governance - **Clinical Leader** ☐ Criterion 4.1.1 C & D - **Human Resource Officer** – Quality Improvement, Risk Management and Feedback including complaints ☐ Criterion 4.2.2 D - **Information Security** – Computer Security Officer ☐ Criterion 4.3.1 **Safety and Quality use of Medicines** ☐ Criterion 5.3.2 A - **Cold Chain Management** ☐ Criterion 5.3.3 A & F - **Infection Control**	

PRACTICE GOAL	OBJECTIVES TO BE MET BY THE PRACTICE TEAM	PRACTICE SUPPORT TEAM RESPONSIBILITIES	COMPLETED
Update job description Practice Support required ☐ Yes ☐ No ☐ N/A	Practice Manager to update the nominated persons job description with their new role and responsibilities.	Practice Support Office to provide: R & R that can be copies and pasted into Job descriptions Agpal website – Qbay – Standard 4.1 Practice Systems	
Identify team leader for the GP team Practice Support required ☐ Yes ☐ No ☐ N/A	Hold a team meeting and nominate a leader for the GP team GP designated as team leader is: …………………………………		
Identify team leader for the nursing team Practice Support required ☐ Yes ☐ No ☐ N/A	Hold a team meeting and nominate a leader for the nursing team. Practice Nurse designated as team leader is: ……………………………………		
Identify team leader for the reception team Practice Support required ☐ Yes ☐ No ☐ N/A	Hold a team meeting and nominate a leader for the reception team. Receptionist designated as team leader is: ………………………………….		
Accredited Practice	Practice is accredited against Standards 4 with:	Provide monthly resources

Practice Support Building Block 1
Evaluation

Practice Name: ....

Date of completion: ....

Profession: ☐GP ☐Nurse ☐Practice Manager

Name: ....

Practice Support Officer for the Practice: ....

Please rate the support given by your Practice Support Officer	Poor	Average	Excellent
The support provided to your Practice by your Practice Support Officer was :-			
Practice Support Officer was prompt in responding to your requests for support			
Rate the degree to which your learning needs were met	**Not met**	**Partially met**	**Entirely met**
This working activity met the learning needs of our Practice			
Rate the degree to which the activity is relevant to your practice	**Not relevant**	**Partially relevant**	**Entirely relevant**
This working activity was relevant to my practice			
Rate the degree to which the learning outcomes were met:	**Not met**	**Partially met**	**Entirely met**
Leadership, Team building & team meetings			
Clinical Governance and Clinical Handover			
Documentation of medical records			
Risk Management			

What changes did you implement in your practice, as a result of completing this work activity that has been successful and ongoing?

CLINICAL LEADERSHIP –

Building Block 1 of High Performing General Practice

REPORT CARD

On initial assessment of Building Block 1 of a High Performing General Practice, your Practice identified as having met the following goals:

Practice Goal	Status
Identify a clinical leader for the Practice	☐ Met
Update job description	☐ Met
Identify team leader for the GP team	☐ Met
Identify team leader for the nursing team	☐ Met
Identify team leader for the reception team	☐ Met
Accredited Practice	☐ Met

During the period of October 2017 and February 2018 your Practice achieved the goals and outcomes as follows:

PRACTICE GOAL	OBJECTIVES MET BY THE PRACTICE TEAM
Develop a systematic approach to uploading Shared Health Summaries and Event Summaries to patients – "My Health Record"	Clinical leader to work with the Practice Manager and clinical team on a process to register patients for a My Health Record and to upload a Shared Health Summary to the patient's My Health Record.
Develop a systematic approach to developing individual patient health records that contain sufficient information about each consultation to allow another member of the clinical team to safely and effectively	Clinical leader to work with the clinical team to develop a systematic approach to ensuring that ALL relevant information is documented in an accurate and timely manner into the patient health record relating to consultation notes. – Criterion 1.7.3

Building Block 2 – Data Driven Management

- ➢ Registration for Quality Health Information Program
- ➢ Installation of PEN tool
- ➢ Installation of TOP BAR
- ➢ Clinical data auditing
- ➢ Benchmarking data
- ➢ Action plan for improving quality of data
- ➢ Use of recalls and reminders
- ➢ Sharing data with Practice team
- ➢ Quality Improvement activities
- ➢ Performance data – Team meetings
- ➢ Practice Population Activity
- ➢ Appointment Review and restructure Activity
- ➢ Chronic Disease Management Register Activity

Building Block 3 – Empanelment

- Linking patients to a regular GP in the software

- Allocating patients to a care team (Practice Nurse – Care Co Ordinator)

- Does the Practice calculate an appropriate number of patients per care team and regular GP?

- Does the practice regularly review clinician workloads and adjust accordingly?

- Do clinicians report satisfaction with the balance between patient's demands and their capacity to provide care?

Building Block 4 – Team based care

➢ Non-clinicians who add primary care capacity

➢ Practice teamlets

➢ Larger teams supporting teamlets

➢ Daily huddles

➢ Standing orders

➢ Assigning sub-caseloads of patients

Monthly resource pack

➢ Accreditation item

➢ A criterion including indicators – any resources to reach this criterion

  ➢ Demographic item -   prompts etc for reception staff (Emergency Contact)
  ➢ Clinical item   -   prompts etc for clinicians (Allergies – prompt to ensure completed – 3 items)

➢ Medico-legal fact sheet

➢ Health calendar item – posters, brochure

➢ Focus on a risk factor (1 or 3 months etc)

Thank You

Would your Practice like to work through Building Block 1 – Clinical Leadership