



**Leveraging data for
QI success**

Acknowledgement of Country

In the spirit of reconciliation, Cubiko acknowledges the Traditional Custodians of country throughout Australia and their connections to land, sea and community. We pay our respect to their Elders past and present and extend that respect to all Aboriginal and Torres Strait Islander peoples today.

Gaagal by Miimi and Jiinda



Housekeeping

- Please change your chat from 'Host and Panelists' to 'Everyone' so that everyone can view and join in the conversation.
- If you have a question, please add it to the Q&A area at the bottom of your screen. This helps ensure that we can see and answer your questions.
- This session will be recorded. A copy of the recording will be sent out later today, along with any links or resources shared in today's session.
- For all Medicare item claiming and interpretation questions please contact Services Australia directly.

Overview of today's session

Leveraging data for Quality Improvement success

- How to best leverage data to plan, measure and set quality improvement goals
- The simplest ways to achieve meaningful patient health and operational improvement outcomes
- The best workflows for engaging your broader practice team and reducing admin in quality improvement

Using data for Accreditation and Quality Improvement

The role of data...

Collecting and using data helps practices to

Identify

- Accurately identify problem areas that need improvement

Prioritise

- Assist to prioritise your Quality Improvement activities

Implement

- Implement changes that will improve patient safety and care

Report

- Understand if improvement has occurred over time and show progress

Using data for Accreditation and Quality Improvement

The role of data...

Accreditation is assessed against the *RACGP Standards for general practices (5th edition)*

- Quality Improvement has its own module within the Standards and involves 3 QI Standards
- QI Standard 1 has its own set of Criterion relating directly to Quality Improvement activities and specifically QI 1.1 which has four mandatory indicators to be achieved for Accreditation

Quality improvement module

QI Standard 1

Quality improvement

QI Standard 2

Clinical indicators

QI Standard 3

Clinical risk management

Criterion QI1.1 – Quality improvement activities

Indicators

QI1.1▶A Our practice has at least one team member who has the primary responsibility for leading our quality improvement systems and processes.

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

QI1.1▶C Our practice seeks feedback from the team about our quality improvement systems and the performance of these systems.

QI1.1▶D Our practice team can describe areas of our practice that we have improved in the past three years.

Using data for Accreditation and Quality Improvement

The role of data...

Proposed changes in the worth for the RACGP Standards 6th edition

CQI.1▶ A Our practice team undertakes continuous quality improvement activities.

You must:

- train team member/s who have the primary responsibility for quality improvement activities in your practice about their role
- have a system to identify quality improvement activities
- include at least one **clinical improvement** activity every 12 months
- keep a record of feedback from your practice team about quality improvement systems
- document quality improvements made to your practice or practice systems in response to feedback, complaints, or audits.

Using data for Accreditation and Quality Improvement

Overview of Quality Improvement and PIP QI

What is Quality Improvement?

The **RACGP** defines continuous quality improvement as an ongoing activity undertaken with general practice. The primary aim is to monitor, evaluate and improve the quality of healthcare delivered to patients.

What are QI Activities?

Quality Improvement activities are the collaborative effort of the whole practice team to identify areas of improvement to increase the quality of patient care and safety in their practice. These activities can relate to practice structures, practice systems and clinical care.

The QI Activities chosen need to be based off your own practice's data - **Cubiko!**

Using data for Accreditation and Quality Improvement

Overview of Quality Improvement and PIP QI

What is PIP QI?

- The Practice Incentive Program's Quality Improvement (PIP QI) Incentive is a payment to general practices that participate in quality improvement activities to improve patient outcomes and deliver best practice care.
- The PIP QI Incentive rewards general practices for undertaking continuous quality improvement activities in partnership with their local PHN through the collection and review of practice data.
- Practices can focus their quality improvement activities on the specified 10 Improvement Measures, or alternatively, practices can choose to focus their activities on other areas.

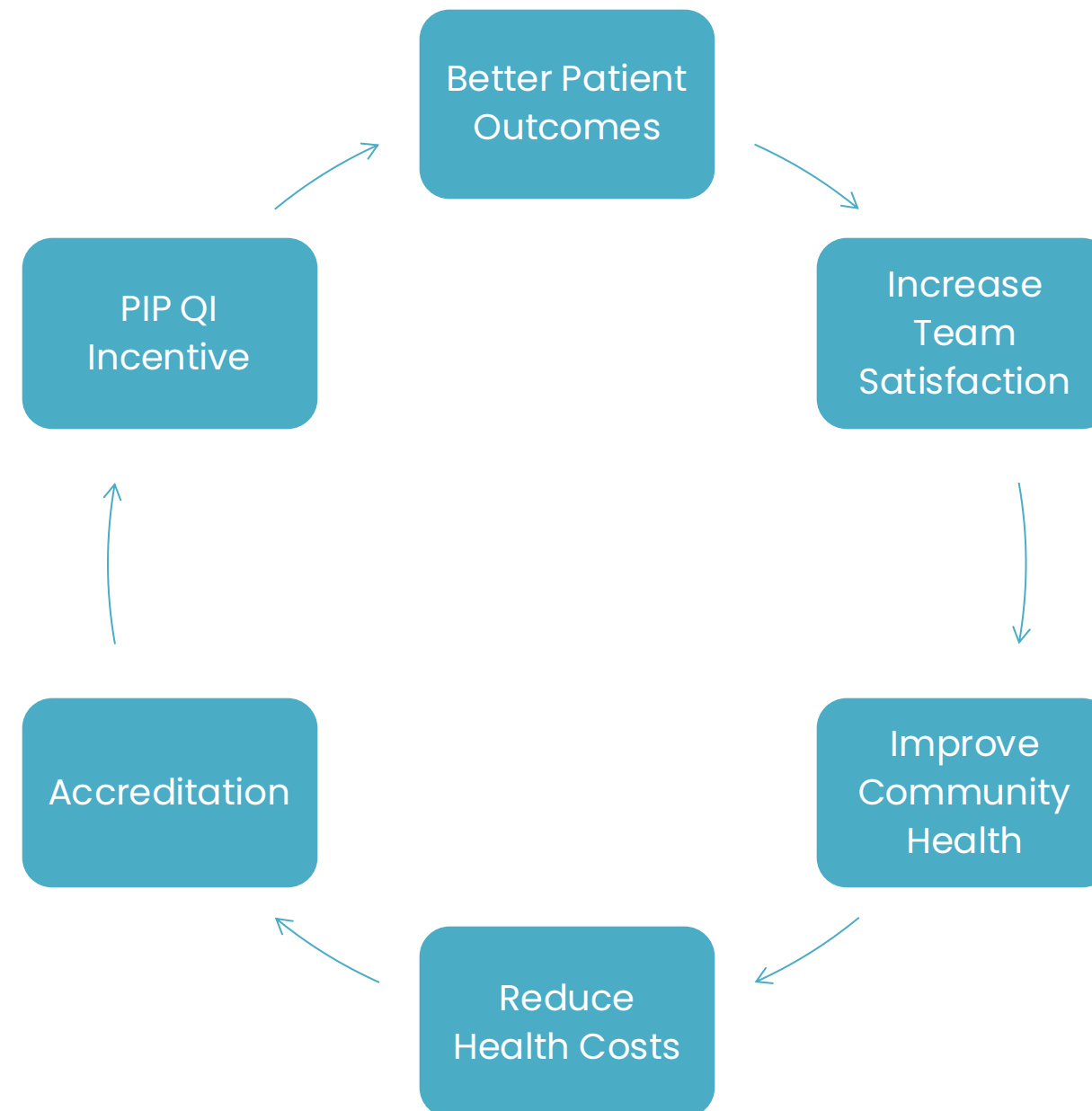


More information can be found at [The Department of Health and Aged Care website](#)

Using data for Accreditation and Quality Improvement

Overview of Quality Improvement and PIP QI

Why undertake Quality Improvement?



Audience Poll!

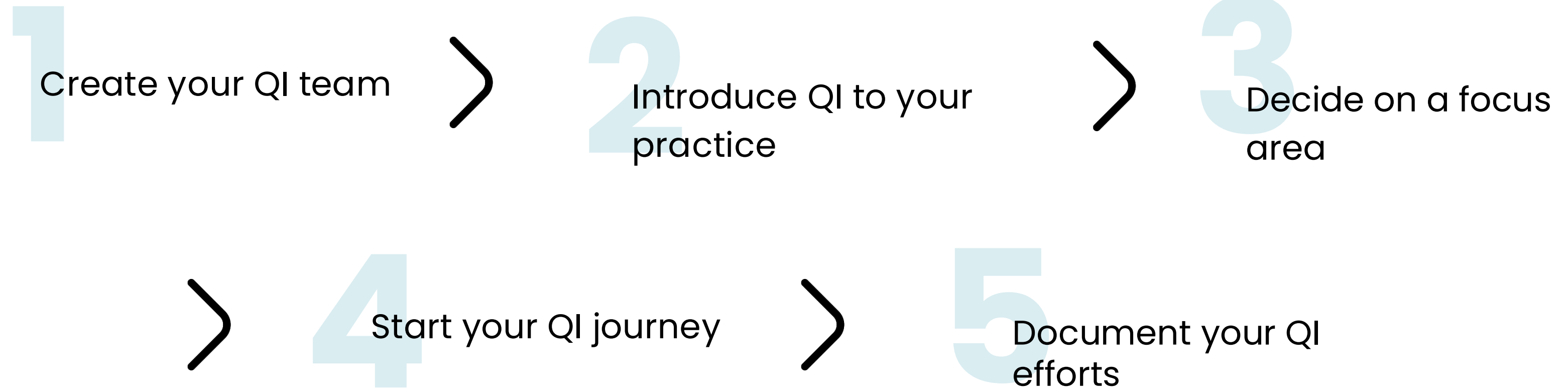
When do you next have accreditation due?



Using data for Accreditation and Quality Improvement

Overview of Quality Improvement and PIP QI

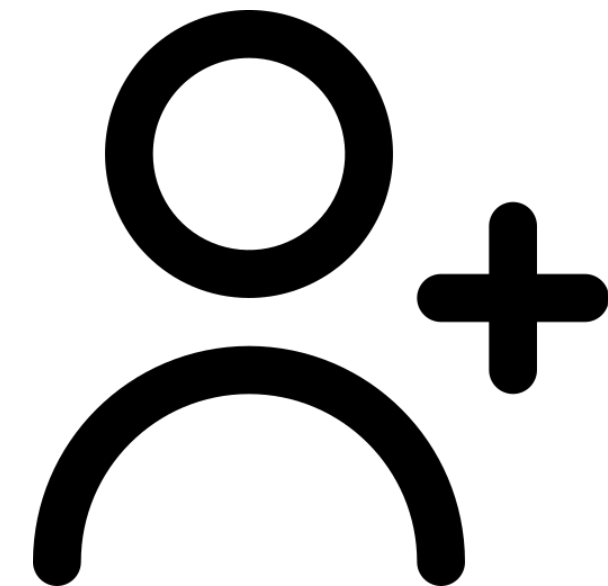
Steps involved in a Quality Improvement Activity



Quality Improvement

Step 1: Create your QI team

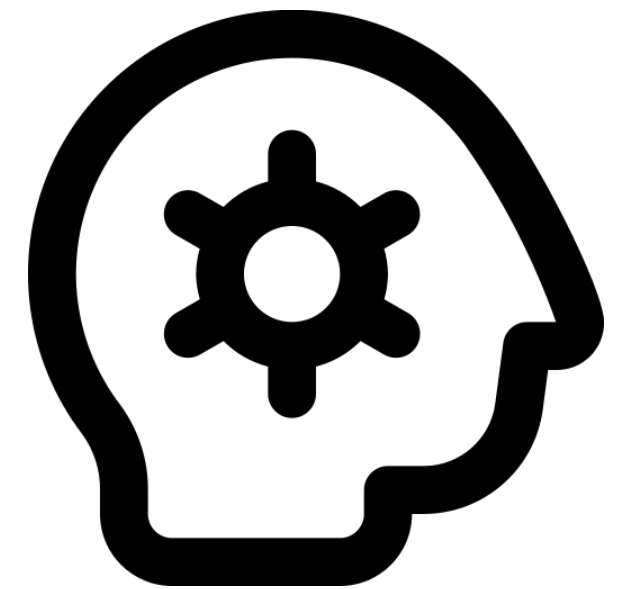
- Get the team involved – you can't run QI activities by yourself!
- Identify who will lead the QI team
- Identify who will be involved in the QI activities
- Assign roles and responsibilities
- Allocate time to meet regularly
- Allocate time to perform the QI activities in the practice
- Track and measure – using a Plan, Do, Study, Act (PDSA) Cycle



Quality Improvement

Step 2: Introduce QI to your practice

- Inform the whole practice team
- Go over the assigned roles and responsibilities for the QI activity
- Provide regular feedback on what the QI team is currently working on
- Choose the metrics that are relevant to your practice
- Prioritise your QI activities
- Keep it simple!
- Set small achievable targets that encourage and motivate the team
- Encourage the team to ask questions 'How are we going?' and 'Can we do this better?'
- Brainstorm and trial different ideas within each cycle



Using Data for Quality Improvement

Step 3: Decide on a focus area

- Cubiko has hundreds of metrics that you can use to create QI activities!
- Get ideas from your practice team about what will help your practice improve and provide better care to your patients.
 - Recalls / Reminders
 - Medicare / DVA exceptions (rejections)
 - Held accounts
 - Outstanding debt
 - Health Assessments
 - Chronic Disease Management
 - Patient wait time
 - Time till third next available appointment

Using Data for Quality Improvement

Step 3: Decide on a focus area

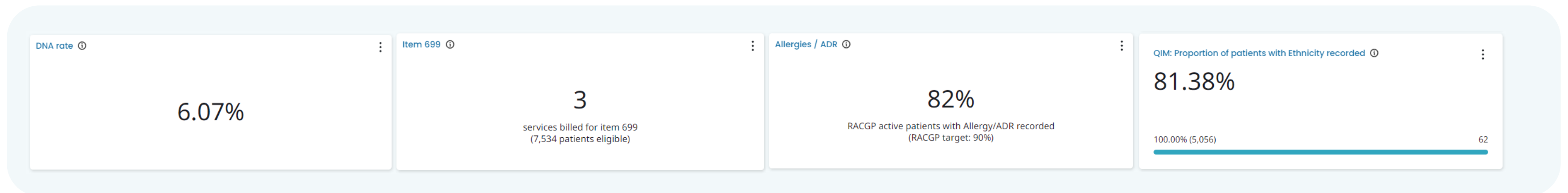
Dedicated Quality Improvement cabinet to assist with your QI Activities:

DNA rate

Item 699

Allergies / ADR

Ethnicity



Using Data for Quality Improvement

QI: DNA rate – improve your practice DNA rate

What is the problem we want to solve?

- Reducing your DNA rate is vital for practices as it will ultimately help improve your patients' access to your healthcare services.
- The potential value of impacted billings from your DNA patients can also be quite significant and impact both your cash flow and the profitability of the practice.



Using Data for Quality Improvement

QI: DNA rate – Improve your practice DNA rate

Which reports to use

- List of unconfirmed appts today
- List of frequent DNAers with an appointment booked

Unconfirmed appts today ⓘ						Frequent DNAers booked ⓘ					
	INTERNALID	Record no.	Time	DNA...	Patient		INTERNALID	Record no.	Next appt d...	Next app...	Patient
1	7147	27375	4:30 PM	36%	surname 8888, firstname 1587 (18yrs -	1	2970	19726	15/09/2022	11:30	surname 6141, firstname 7173 (€
2	12329	35194	4:00 PM	25%	surname 6462, firstname 1873 (44yrs -	2	35495	36684	15/09/2022	13:30	surname 4258, firstname 7655 (€
3	1699	195841	2:00 PM	21%	surname 3315, firstname 6115 (26yrs -	3	7147	27375	15/09/2022	16:30	surname 8888, firstname 1587 (1
4	12295	35004	3:30 PM	17%	surname 7857, firstname 1873 (19yrs -	4	317	00015150	16/09/2022	10:00	surname 4657, firstname 2138 (€
5	7302	3823	2:40 PM	13%	surname 5866, firstname 2314 (52yrs -	5	37079	38523	16/09/2022	10:10	surname 5413, firstname 6612 (€

Frequent DNAers booked

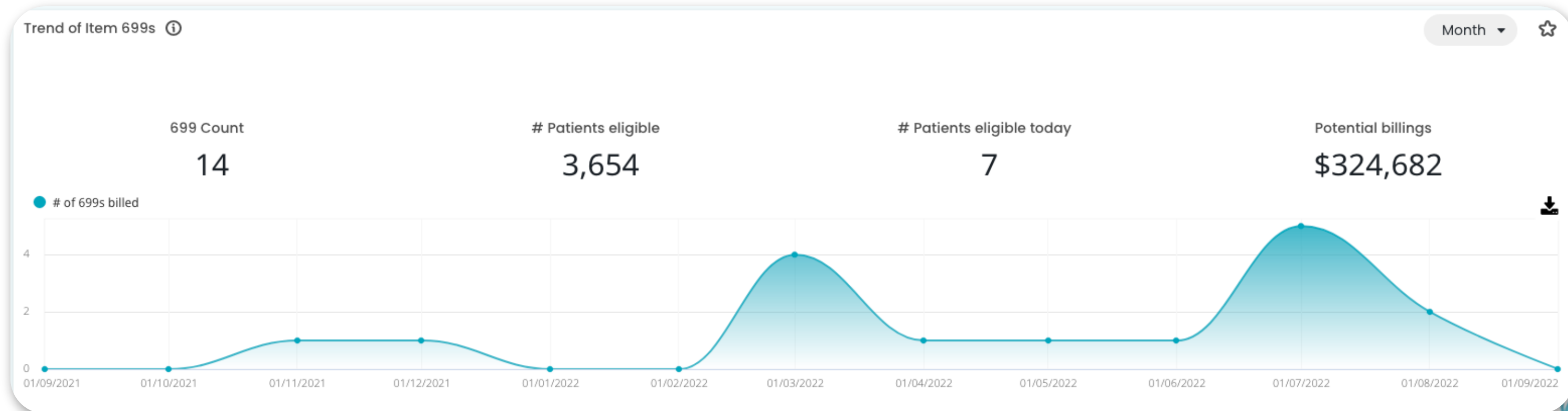
For a patient to be considered a frequent DNAer they generally have a DNA rate of 33% and at least 3 DNAs in the past 12 months

Using Data for Quality Improvement

QI: Item 699 – increase the number of Heart Health Checks performed

What is the problem we want to solve?

- Increase the number of Heart Health Checks performed – maximise use of this service item – extended availability from June 2023 to June 2025.
- Increasing the number of Heart Health Checks performed by your practice will improve your patients' health outcomes.



Using Data for Quality Improvement

QI: Item 699 – increase the number of Heart Health Checks performed

Nova – Vantre Health

“At the start of the year I was focusing on getting patients in for an Item 699.” says Nova “The first patient we had in for a Heart Health Check was a 73-year-old male. He had perfect blood pressure, ate well, didn’t smoke, no alcohol and exercised. He’s been to the practice before and there was never a reason to do an ECG. We got him in for a Heart Health Check, did an ECG and off to the hospital he goes with complications. Without that Heart Health Check it would have gone undiagnosed.”



Using Data for Quality Improvement

QI: Item 699 – increase the number of Heart Health Checks performed

How Data can help

- List of potential patients for item 699
- Download Cubiko's Heart Health Check workflow

Potential patients for item 699 ⓘ Appointment next 5 days ▾ ⬇️ ⭐

	INTERNALID	Record no.	Appt date	Time	Patient	Appt with	Appt type	Last seen doctor	Usual doctor	# visits in the past ...
1	811	00032048	19/09/2022	08:00	surname 3786,	firstname 2348	description 7652	firstname 6232	firstname 6232	66
2	3643	17194	19/09/2022	08:00	surname 5511,	firstname 6232	description 7432	firstname 6232	firstname 6232	24
3	310	194030	19/09/2022	08:00	surname 2725,	firstname 5631	description 1127	firstname 6436	firstname 8183	24
4	35795	37062	19/09/2022	08:20	surname 4734,	firstname 2341	description 8412	firstname 6776	firstname 2341	75
5	2048	007587	19/09/2022	08:20	surname 1417,	firstname 6232	description 7432	firstname 6232	firstname 6232	44
6	35254	36389	19/09/2022	08:20	surname 3737,	firstname 8756	description 5178	firstname 3763	firstname 6341	23

Include patients with: ▾

🔍 Filter...

- All patients
- No appointment booked
- Appointment booked
- Appointment today
- Appointment next 5 days

🔍 FILTERS 🔄 Reset

Next appt with 🗑️

Next appt with...

Patients with 3+ appts in 2 yrs 🗑️

Exclude Patients eligible for other Health Assessments 🗑️

Include all adults aged 30-45 years 🗑️

Download: Heart Health Check Workflow

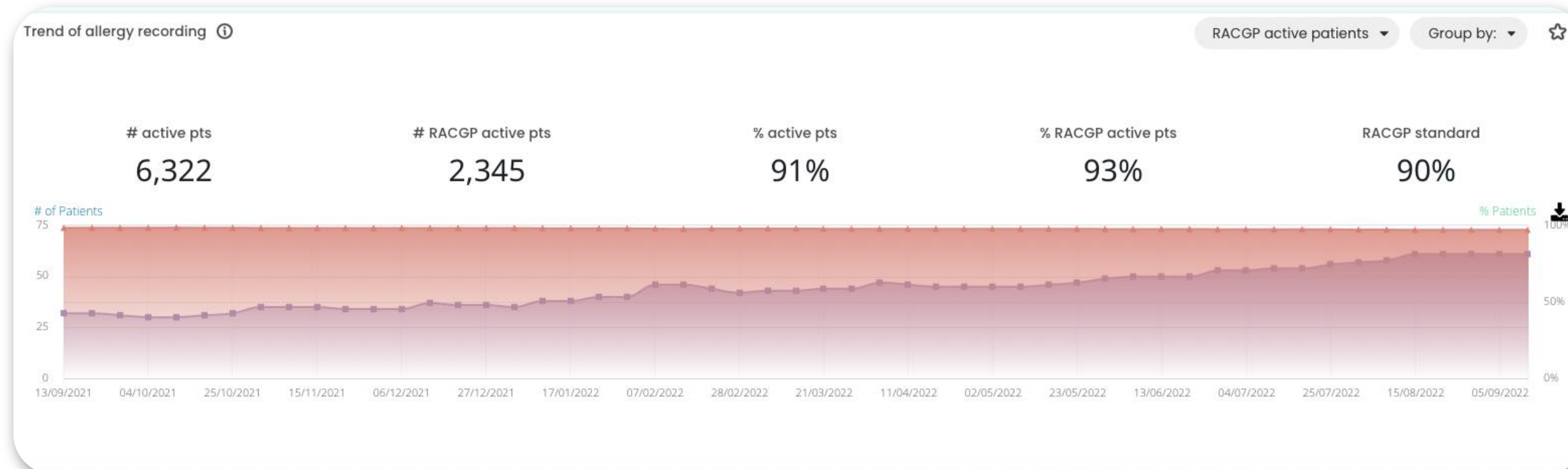


Using Data for Quality Improvement

QI: Allergies / ADR – improve the percentage of allergies recorded in your patient records

What is the problem we want to solve?

- Increasing the number of patients with their allergy status and relevant adverse drug reactions (ADR) recorded is essential to providing high-quality care to your patients.
- As per the RACGP standards for General Practice (5th Ed), to meet the standard of criterion QI 2.1 Health Summaries, a practice must record known allergies for at least 90% of its active patient health records and any relevant adverse drug reactions.



Using Data for Quality Improvement

QI: Allergies / ADR – improve the percentage of allergies recorded in your patient records

How data can help

- Look for patients coming into your clinic who are missing a recording
- Track your practice's trend of allergy recording over time to assist in showing evidence in your PDSA cycle on how you have improved in this area.

Patients to record allergies ⓘ



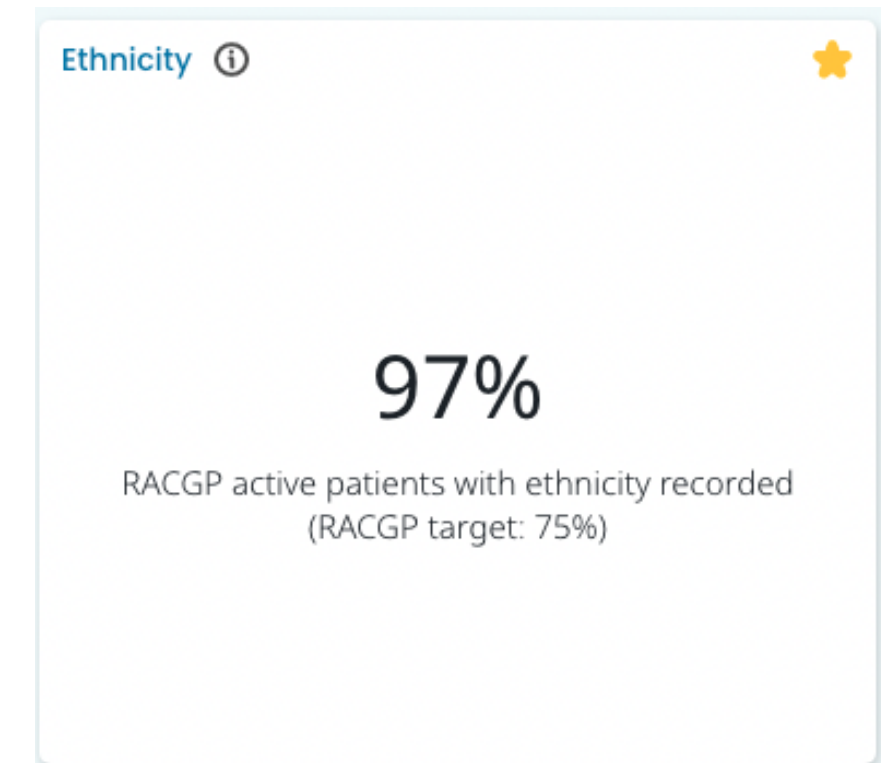
	Appt date	Time	Patient	Appt with	Appt type	Last seen doctor	Usual doctor	INTERNAL*
1	13/09/2022	08:20	surname 2833, firstname 8748 (47yrs -	firstname 2253	description 6281	Doctor unknown to	firstname 2253	34591
2	13/09/2022	08:30	surname 4353, firstname 2761 (75yrs -	firstname 1453	description 6867	firstname 6776	firstname 6341	38618
3	13/09/2022	09:00	surname 4738, firstname 7426 (51yrs -	firstname 1453	description 1525	firstname 3523	firstname 6341	38972
4	13/09/2022	09:00	surname 5845, firstname 3633 (60yrs -	firstname 6436	description 7432	firstname 6436	firstname 6341	38924
5	13/09/2022	09:20	surname 8368, firstname 3485 (64yrs -	firstname 6436	description 7432	firstname 2341	firstname 6341	35760
6	13/09/2022	09:30	surname 3873, firstname 2118 (52yrs -	firstname 4383	description 6867	firstname 3523	firstname 6341	38757
7	13/09/2022	09:30	surname 6165, firstname 6611 (1yrs - city	firstname 2721	description 8412	firstname 6436	firstname 6341	36312
8	13/09/2022	10:10	surname 8747, firstname 4483 (65yrs -	firstname 6776	description 1525	firstname 3523	firstname 6341	11736
9	13/09/2022	11:30	surname 4372, firstname 7662 (60yrs -	firstname 6713	description 6867	firstname 6713	firstname 6341	13773

Using Data for Quality Improvement

QI: Ethnicity – improve the number of patients with Ethnicity recorded

What is the problem we want to solve?

- Recording the ethnicity of your patients allows you to better understand your patient cohort and will ultimately lead to improvements in your patients' health outcomes.
- Recording of ethnicity also allows your practice to offer different services based on risk factors for different ethnic groups.



Using Data for Quality Improvement

QI: Ethnicity – improve the number of patients with Ethnicity recorded

- As per the RACGP standards for General Practice (5th Ed), to meet the standard of criterion QI 2.1 Health Summaries, a practice must have a current health summary for at least 75% of your active patient health records, this health summary should include ethnicity and cultural background.



Using Data for Quality Improvement

QI: Ethnicity – improve the number of patients with Ethnicity recorded

Which reports can help

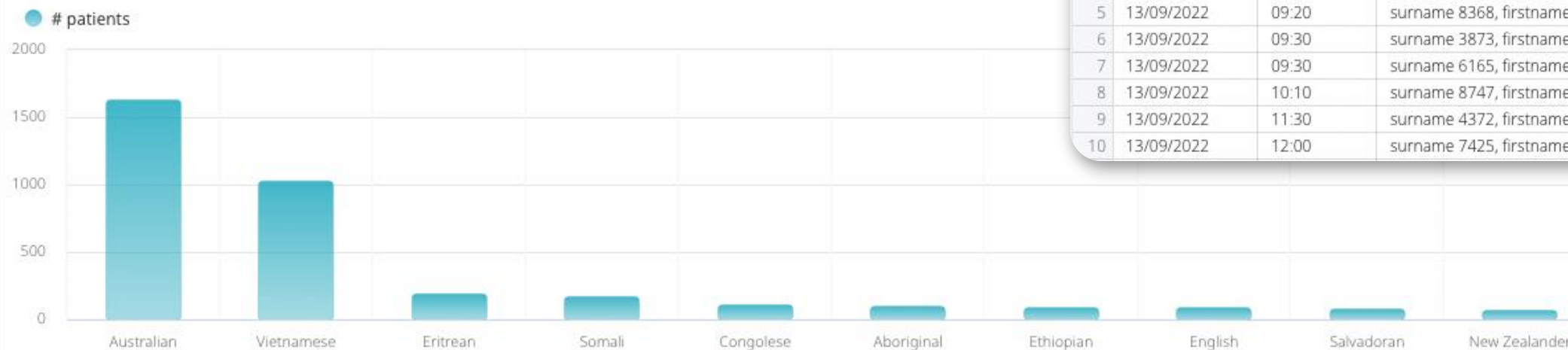
- List of patients to record ethnicity
- Ethnicity breakdown
- Recording of ethnicity allows your practice to have patient information available in the languages most likely to be spoken by your different ethnic groups

Patients to record ethnicity ⓘ

Include patients with: ▾ ⬇️ ☆

	Appt date	Time	Patient	Appt with	Appt type	Last seen doctor	Usual doctor	INTERNAL [®]
1	13/09/2022	08:20	surname 2833, firstname 8748 (47yrs -	firstname 2253	description 6281	Doctor unknown to	firstname 2253	34591
2	13/09/2022	08:30	surname 4353, firstname 2761 (75yrs -	firstname 1453	description 6867	firstname 6776	firstname 6341	38618
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8	13/09/2022	10:10	surname 8747, firstname 4483 (65yrs -	firstname 6776	description 1525	firstname 3523	firstname 6341	11736
9	13/09/2022	11:30	surname 4372, firstname 7662 (60yrs -	firstname 6713	description 6867	firstname 6713	firstname 6341	13773
10	13/09/2022	12:00	surname 7425, firstname 5372 (yrs - city	firstname 6263	description 3561	firstname 6263	firstname 6341	3936

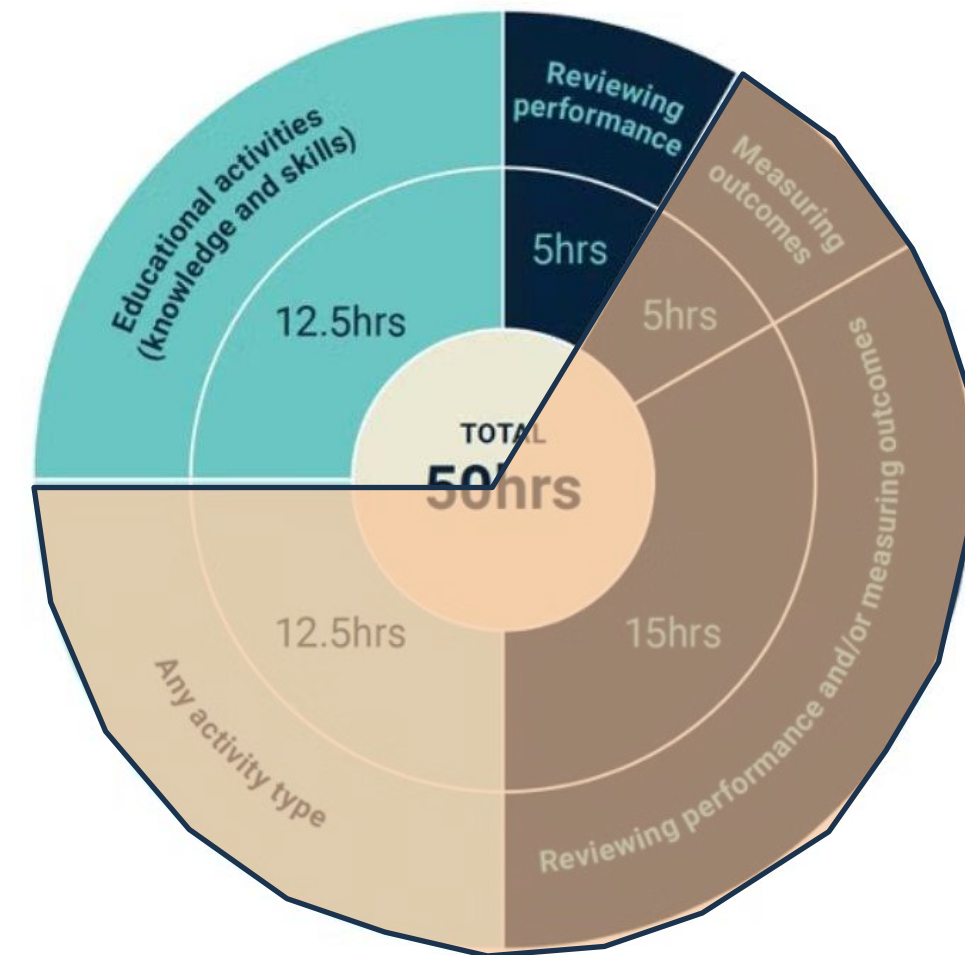
Ethnicity breakdown ⓘ



Using Data for Quality Improvement

Combining practice QI with GP CPD Measuring outcomes

- General Practitioners are required to complete Measuring Outcomes activities as part of CPD
- Measuring outcomes can total up to 32.5/50 total CPD hours
- Many of the RACGP approved activities align perfectly to practice quality improvement activities



Using Data for Quality Improvement

Combining practice QI with GP CPD Measuring outcomes

QI: 75+ Health Assessment

- Proportion of patients aged 75 and over who have had their 75+ Health Assessment
- An extraordinary assessment for our aging patients, perfect for early detection of health issues, medication management, immunisations, social function and more!

Key Insights

You have **629** RACGP active patients who are aged 75 or older. **122** are potentially eligible for a 75+ Health Assessment, and **51** are coming to the Practice this week.

DEV

Select the dates you want to run this activity across

Select the date range you want to run this activity across. You can come back at any time to adjust this date.

Select your activity size and potential CPD hours

Choose from three activity size options based on a small, medium or large opportunity to supercharge your patient care and earn CPD hours.

Large 10 actions = 10 hours (Activity ID: 954398)

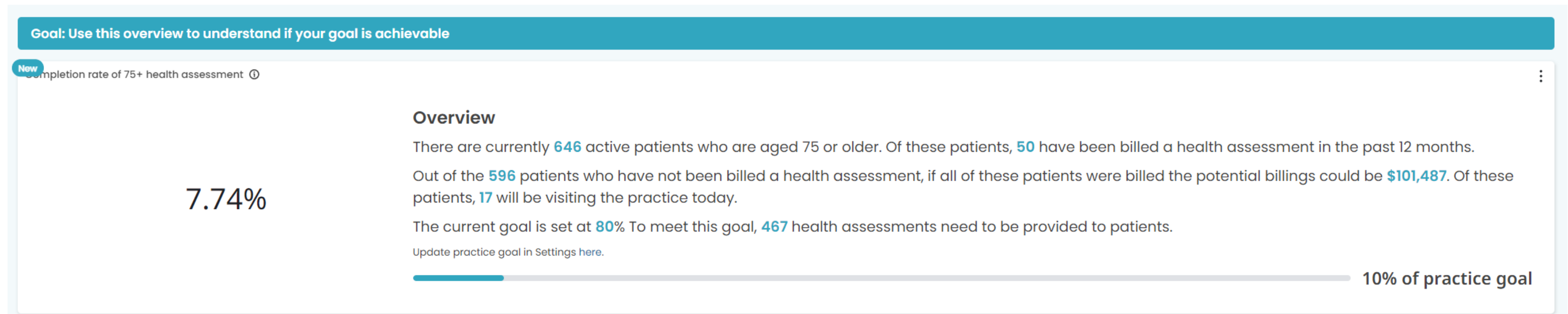
Cancel Confirm

Using Data for Quality Improvement

Combining practice QI with GP CPD Measuring outcomes

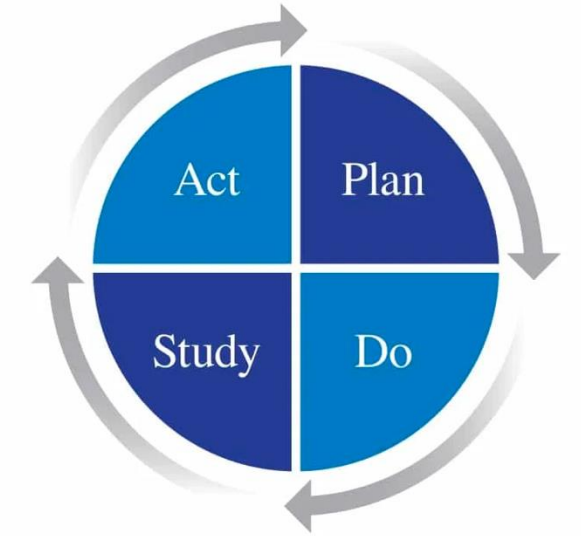
QI: 75+ Health Assessment

- Proportion of patients aged 75 and over who have had their 75+ Health Assessment
- An extraordinary assessment for our aging patients, perfect for early detection of health issues, medication management, immunisations, social function and more!



Quality Improvement

Step 5: Document your QI efforts



Plan, Do, Study, Act (PDSA) cycle

Use our PDSA Template to help you track your Quality Improvement Activities.

The PDSA cycle is a method used to track and record a change you're making in your practice. The process involves 4 steps:

Plan: What do you want to achieve? State the goals and objectives of your activity, make predictions about what will happen and develop a plan.

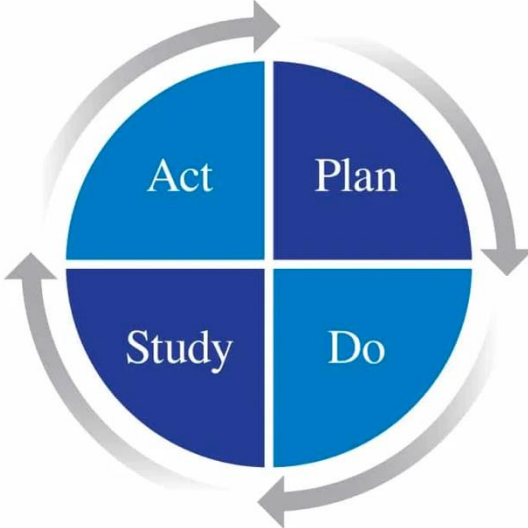
Do: Carry out your plan for the activity, during this stage you can document the problems you experience and any observations and begin review of the data collected.

Study: How will we know that this plan has resulted in improvement? Set time aside to review your results, compare the data to your predictions and reflect on what you learned.

Act: What changes can we make next time that will result in further improvement? Prepare a plan for the next cycle.

Quality Improvement

Step 5: Document your QI efforts

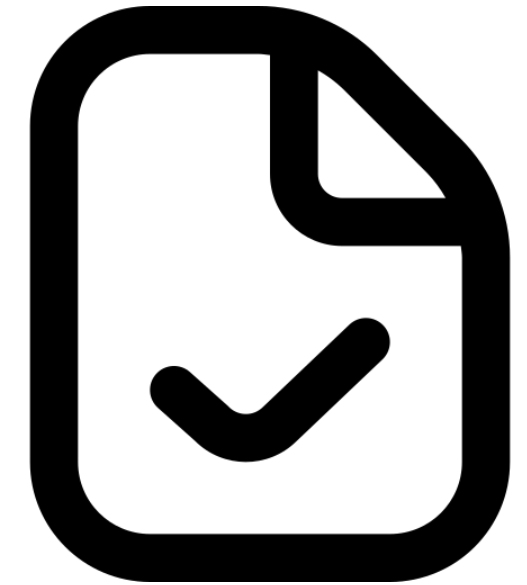


Plan, Do, Study, Act (PDSA) cycle



Quality Improvement

Step 5: Document your QI efforts



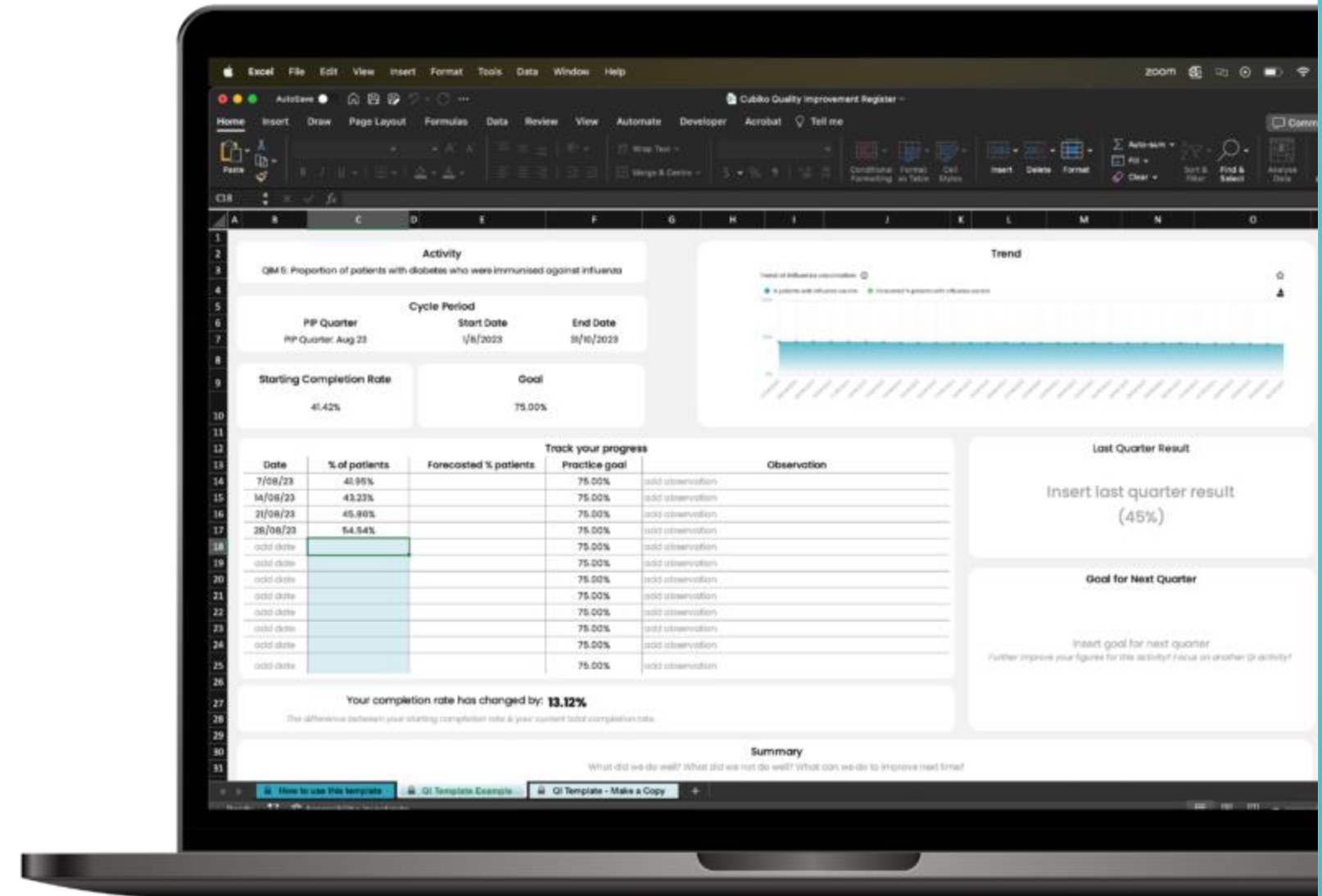
Quality Improvement Register

Download our Quality Improvement Register to help you track your QI activities!

How to use the Quality Improvement Register:

- Use the excel sheet for either historical or current QI activities.
- Enter the relevant information in the excel spreadsheet and store for in a safe place for when you have an accreditation visit.
- There are additional columns where you can enter your Cubiko metrics and goals for what you're tracking.

Download: Quality Improvement Register



Accreditation

General Practice Register

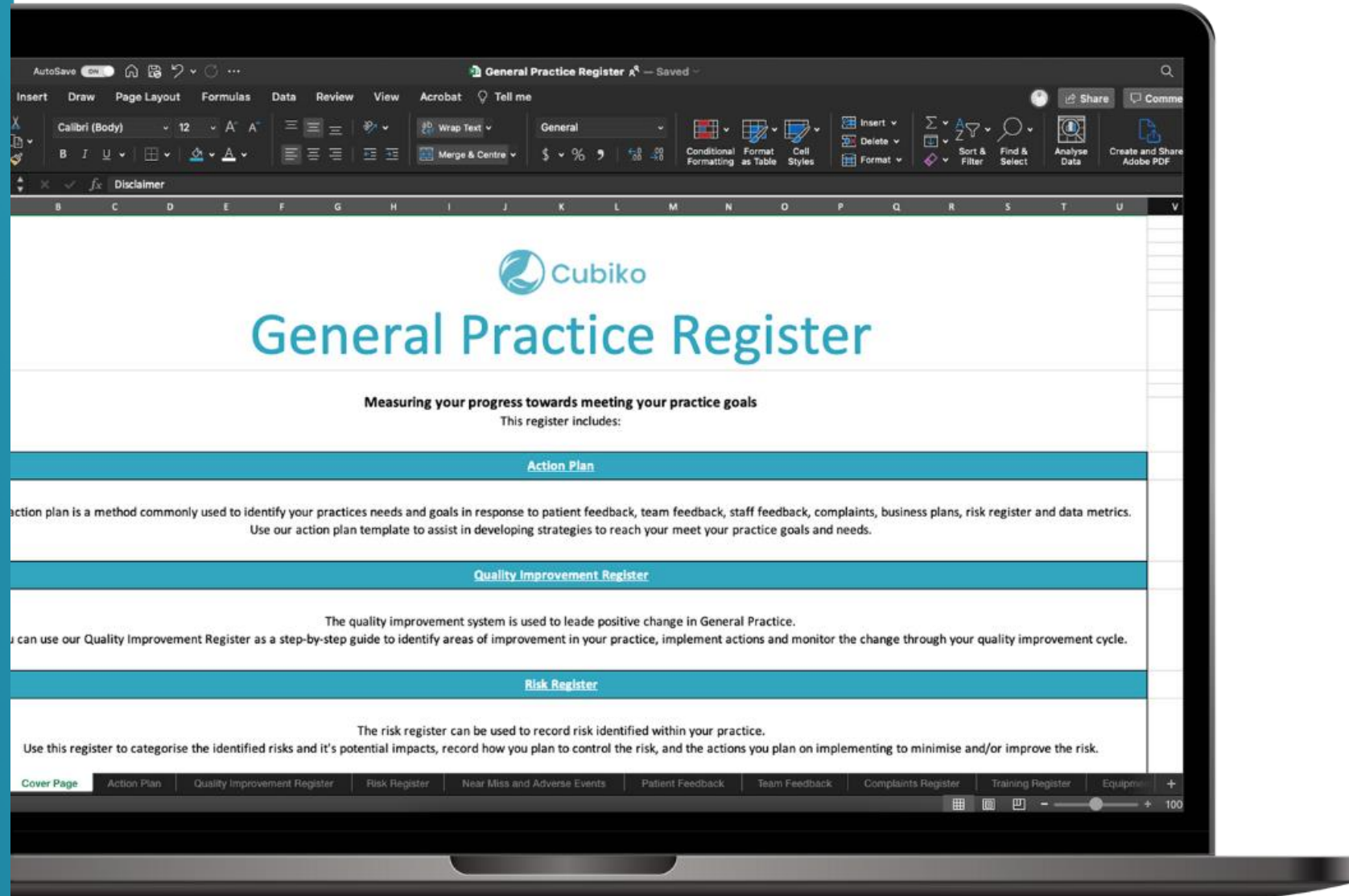
Download our General Practice Register to help ensure you meet your accreditation requirements.

This register includes:



- Action Plan
- Quality Improvement Register
- Risk Register
- Near Miss and Adverse Events Register
- Patient Feedback Register
- Team Feedback Register
- Complaints Register
- Training Register
- Equipment Register

Download: General Practice Register





Chat to the Cubiko team!

