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## Chronic Condition Management (CCM) Practice Preparation Checklist

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| **PLANNING AREA** | **TASKS TO DO** |
| 1 - Plan the transition | * Designate a CCM change lead and change team * Plan team roles in the transition according to staff skills, interest and position * Have a change team meeting and communicate upcoming changes to the team * As a team, plan key activities and timelines * Document the change plan * Communicate change plan to the whole practice * Set up a shared file/folder for the change team to share documents etc |
| 2 - Review your resources | * Do a stocktake of existing CDM resources * Locate resources in central location for ease of access * Allocate staff members and timelines for updating resources |
| 3 - Prepare your team | * Discuss with your wider team what is changing and why * Get staff ideas and feedback on proposed change plans * Plan each team members role in the transition process * Ensure team members have dedicated time to do their required tasks * Plan regular meetings of the change team to track progress * Communicate progress regularly with whole of practice via noticeboard, email, group chat, staff meetings * Discuss the upcoming changes with your allied health providers |
| 4 - Raise patient awareness | * Consider patient messaging (What’s in it for them?) * Poster, information sheets brochures for patients * Calls to action/communications to patients (email, SMS, direct communication) * Train reception staff in MyMedicare and CCM messaging * Ensure reception is opportunistically registering patients for MyMedicare * Coordinate the MyMedicare registration of RACH patients * Monitor the list of your patients who have deregistered from your practice in HPOS and follow up |
| 5 - Recall existing CDM patients | * Communicate changes from CDM to CCM to patients * Recall existing CDM patient for new CCM plan * Determine/review the process for booking review appointments * Document and communicate any changes to booking processes |
| 6 - Identify new CCM patients | * Use clinical software and other data tools identify eligible patients by condition, medication, etc * Identify patients who have been previously identified for CCM but have not taken up the offer and follow up with them (eg Primary Sense Health Assessment or Patient with High Complexity reports) * Opportunistically identify new CCM patients during consultations, HA’s, immunisations etc |
| 7 - Check in, review and celebrate | * What is needed to embed the current changes? * How will your track CCM reviews? * Update workflow documents, position descriptions and policy and procedures manuals * Plan your next steps * How will you celebrate your successes? |

Version 1 – 7 March 2025