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|  CONTINUOUS QUALITY IMPROVEMENT PLAN |
| Practice Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Topic Diabetes  |

Practices are invited to complete between two and four CQI activities. You may choose from the activities outlined in the Diabetes Practice Guide or you may or develop practice-specific activities tailored to your patient cohort.  The [Practice Development Matrix](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fpracticesupport.org.au%2Fweb%2Fassets%2Fimages%2FRES_Practice-Development-Matrix_March-2025.docx&wdOrigin=BROWSELINK) can help practices to develop these practice-specific activities.

Practices that complete **at least 2 CQI activities and submit their completed paperwork to Brisbane North PHN** will be provided access to the CDM Plus portal from 1 June 2025 – 30 June 2026.

The **CDM Plus portal allows** practices to access 25% discount on selected training services and products such as workshops, training sessions, and health promotion products as well as access to a range of online resources including templates, Webinars and information Sessions.

CDM Plus resources are continually updated to reflect MBS, MyMedicare and Clinical Software changes and cover a range of topics including:

* Asthma
* CVD
* Diabetes
* Kidney Disease
* Cervical cancer
* COPD
* Health Assessments (Including 715)
* Mental Health
* Osteoporosis
* Skin Cancer
* COVID/ Immunization

### Instructions:

1. To participate, **complete Part 1** of this Continuous Quality Improvement Planand submit it to practicesupport@brisbanenorthphn.org.au **by 30 May 2025.**
2. Brisbane North PHN will get back to let you know if you have been approved to participate in this CQI Activity.
3. Work on your proposed activities with the support of your QI&D Engagement Officer between April and August 2025.
4. When you have completed your activities, **complete Part 2** of this Continuous Quality Improvement Plan and submit it to practicesupport@brisbanenorthphn.org.au **by 30 August 2025.**
5. We will send you your login details for the CDM Plus portal. You will have full access to the CDM Portal from 1 June 2025 – 30 June 2026.

### Why is Continuous Quality Improvement important?

Continuous Quality Improvement (CQI) activities are actions designed to help practices work better, safer, and smarter. Ideally, **CQI activities are small, incremental adjustments to existing processes that will result in long-term changes that add value to your practice.** Continuous Quality improvement activities boost outcomes for patients by:

* improving practice processes
* improving practice data
* improving patient health outcomes.

In addition to improving patient outcomes and business profitability, General Practices have several key reasons to undertake quality improvement activities:

**1 Practice Incentive Payment – Quality Improvement (PIP QI)**

The PIP QI is an incentive payment from the federal government paid to practices who use data to implement quality improvement activities. The aim of the payment is to improve patient outcomes, practice performance and provider professional development. PIP QI has 10 Quality Improvement measures:

1. Patients with Diabetes with a current HbA1c result
2. Patients with a Smoking Status
3. Patients with a Weight Classification
4. Patients aged 65 and over who are immunised against influenza
5. Patients with Diabetes who were immunised against influenza
6. Patients with COPD who were immunised against influenza
7. Patients with an alcohol consumption status
8. Patients with the necessary risk factors assessed to enable CVD assessment
9. Female patients with up-to-date cervical screening
10. Patients with diabetes with a blood pressure result.

To be eligible for the payment, practices need to:

* work to improve these 10 quality measures in partnership with their local PHN. Practices may choose to undertake quality improvement activities in another area if these activities are informed by their practice data
* share deidentified data with the Department of Health.

**2** **Accreditation.** For accreditation practices need to be at (or have processes in place to be working towards) RACGP data standards in the following areas:

* Recording of allergy status (Accreditation standard is 90%)
* Recording of smoking status (Accreditation standard is 75%)
* Recording of alcohol consumption (Accreditation standard is 75%)
* Recording of patients BMI (Accreditation standard is 75%)
* Recording of patient’s ethnicity (Accreditation standard is 75%)

3 **CPD Hours for General Practitioners.** RACGP requires General Practitioners to complete 50 hours of continuing professional development per year which must include:

* at least 12.5 hours on educational activities
* at least 5 hours reviewing their performance (reflecting on feedback about their work)
* at least 5 hours monitoring outcomes (using data to ensure quality results).

### How do you ‘do’ Continuous Quality Improvement?

Brisbane North PHN uses the Model for Improvement Framework. This approach asks 3 simple questions:

1. What are we trying to accomplish?
2. How will we know if this change is an improvement?
3. What changes can we make that will result in improvement? This process is referred to as the Plan, Do, Study, Act cycle or PDSA. You plan your activities, implement the changes, study the results and decide if these changes are working and react accordingly.

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| **YOUR DETAILS**  |
| **Practice Name**  |  |
| **Business Trading Name**  |  |
| **Address** |  |
| **Phone Number** |  | **Email Address** |  |
| **Clinical Software** |  | **Data Collection Tool/s** |  |
| **Number of GP’s** |  | **Full time equivalent (FTE) GP’s** |  |
| **Accreditation Date** |  | **Accrediting Body** |  |

### PART 1 – Plan your activities

**Your PHN QI&D Engagement Officer can help you with this – call us if you need help 07 3490 3495**

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| **PLAN DETAILS AND TIMELINES** |
| **Focus Area**  |  |
| **Start Date** |  | **Finish Date** |  |
| **Clinical Lead** |  | **Practice Manager** |  |
| **Who will be else will be involved? You will get better results if others in the practice are involved.**[ ]  Other GP’s [ ]  Practice Manager [ ]  Nurse [ ]  Reception Staff [ ]  All Practice [ ]  Health Worker [ ]  Other  |

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| **WHAT ARE YOU TRYING TO ACCOMPLISH?**  |
| **What are you trying to achieve/change/do?** **Make sure your goals are SMART (Specific, measurable, achievable, relevant and time-bound)** |
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| **How does this fit in with your practice’s quality activities?** |
| [ ]  Area of interest/practice focus area[ ]  Process Improvement Activity[ ]  Data Improvement Activity[ ]  Patient Health Outcome Improvement Activity | [ ]  PIP QI Measure[ ]  PIP QI - other data driven improvement[ ]  Accreditation data[ ]  RACGP CPD Activity |
| **How can Brisbane North PHN help you achieve this goal?** |
| [ ]  Goal setting[ ]  Project planning ideas and timelines[ ]  Advice, support, coaching[ ]  Practice Development training[ ]  Primary Sense (data tool) training [ ]  Provision of PHN resources | [ ]  Training opportunities for staff, RN’s and GP’s[ ]  Information about external resources[ ]  Networking and buddying opportunities[ ]  Additional data[ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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|  **HOW WILL YOU KNOW IF THE CHANGE IS AN IMPROVEMENT?** |
| **Why are you making this change? How will this change add long term value to the practice?** |
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| **What does the Primary Sense data tell you now? What other data sources can you access?** |
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| **PLAN, DO, STUDY, ACT** **(You need to complete at least 2 activities to get 12 months access to the CDM Plus portal)** |
| **ACTIVITY NUMBER** | **YOUR ACTIVITIES** | **TIMELINES** | **STUDY THE RESULTS** | **MONITOR YOUR PRORESS** |
| What changes are you going to try? The [Practice Development Matrix](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fpracticesupport.org.au%2Fweb%2Fassets%2Fimages%2FRES_Practice-Development-Matrix_March-2025.docx&wdOrigin=BROWSELINK) can help you with ideas. | When do you want to achieve this by?  | How (and when) will you measure your progress? | How will you know if you are on track? |
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| 3 |  |  |  |  |
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### PART 2 – After the activities

**Your PHN QI&D Engagement Officer can help you with this – call us if you need help 07 3490 3495**

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| **DID THESE ACTIONS WORK?** |
| **Are things working out as you planned? If not, what are you going to do?** |
| Adopt the changes (Success! How do you make this business as usual)Adapt the changes (Pivot as needed and keep trying…)Abandon the changes (Scrap this idea – develop another idea and try again!)Activity 1 – Activity 2 – Activity 3 – Activity 4 –  |

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| **EVALUATION** |
| **How did the project go? What does the data tell you now?** |
| What did the Primary Sense (and other) data tell you at the end?What were the final learnings (the good, the bad and the ugly)?How can you build on this activity? What do you want to try next?  |
| **How will embed this change permanently?** |
| [ ]  Signs[ ]  Document work practices[ ]  Update policy and procedures manual[ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | [ ]  Staff training session [ ]  Update position descriptions [ ]  Staff Induction |
| **Did the activity add value?** |
| How much value the CQI activities to your practice? |
| [ ]  No value | [ ]  Little Value | [ ]  Neutral | [ ]  Some Value | [ ]  Significant value |
| How confident am I about trying future CQI activities? |
| [ ]  Not confident | [ ]  Neutral | [ ]  Slightly confident | [ ]  Fairly confident | [ ]  Very confident |
| What would have made these activities more valuable? |
| **Spread the news!** |
| How will you feedback to staff?How will you celebrate your success? (e.g. Morning tea, practice newsletter, website)Do I have good news stories to share?Do I have cautionary tales to share (information from not-so-great things is still important learning)How could Brisbane North PHN further helped me in this activity? |
| Do you have any photos, quotes, documents or data to support your evaluation? Make sure you includethese documents when submitting your completed plan (but remember to make sure all data is de-identified).[ ]  Yes[ ]  No |

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| **SIGNATURES/APPROVALS** |
| Brisbane North PHN may use your feedback in our communications including PHN publications, website and social medica channels. Do you grant permission for us to share your stories, quotes, photos and other feedback?[ ]  Yes, you may use my feedback and attribute them to my name/practice [ ]  Yes, you may use my feedback anonymously [ ]  No, I do not give permission. |
| Project Lead  | Preferred email for project communication\* | Date |
| GP Lead | Preferred email for project communication\* | Date |
| PHN QI&D Engagement Officer | Preferred email for project communication\* | Date |

\* Email addresses provided will be used for project communication only.