QI PIP Readiness

The following document aims to generate thinking and discussion around how quality improvement is currently embedded within your general practice, the type of activity relevant to your patients and the ways in which you can prepare for the Quality Improvement Practice Incentive Payment changes.

1. Are you registered and claiming any of the following practice incentive payments?

[ ]  Asthma

[ ]  Quality Prescribing

[ ]  Cervical Screening

[ ]  Diabetes

[ ]  General Practitioner Aged Care Access

1. What are your practice’s current challenges in meeting criteria for PIP payments?
2. List 3-5 successes the practice has achieved relating to improved patient experience, patient outcomes or business improvements. *e.g. Completing accreditation; decreased patient T2DM risk factors; increased smoking cessation amongst practice population.*
3. Do you use PENCAT/ CAT4? If so, how often?

[ ]  Weekly

[ ]  Fortnightly

[ ]  Monthly

[ ]  Quarterly

[ ]  Do not use PENCAT

1. What do you use PENCAT/ CAT4 for?

[ ]  Identifying patients at risk

[ ]  Data quality

[ ]  Improving practice revenue

[ ]  Identify patient health needs

[ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. What quality improvement activities do you currently undertake in your practice?
2. Who leads your QI activity? In what ways could the whole of the team become involved in QI?
3. What sort of resources and templates does your practice use for QI activity?

*e.g. RACGP QICPD Handbook, PDSA Templates et*

1. What support or resources could North Western Melbourne PHN provide to help you with QI activities?

We acknowledge the peoples of the Kulin nation as the Traditional Owners of the land on which our work in the community takes place. We pay our respects to their Elders past and present.

Checklist for QI PIP Readiness

|  |  |
| --- | --- |
| Data Quality  |  |
| Define the practice’s processes around cleaning and maintaining patient data. | [ ]  |
| Educate and upskill staff to ensure GPs are coding, nurses are inputting correct information and front office staff are updating demographics | [ ]  |
| Ensure PENCAT is installed and extracting data on a routine basis | [ ]  |
| Identify patient populations  |  |
| Use PENCAT to establish patterns, risk factors and patient demographics that could be improved.  | [ ]  |
| Identify community and local population needs. | [ ]  |
| What has previously worked and not worked? | [ ]  |
| Assign a QI project lead and team |  |
| How will the practice ensure a whole of team approach? | [ ]  |
| Identify the roles and responsibilities for each team member | [ ]  |
| Delegate and plan for staff protected time | [ ]  |
| Identify tools and resources |  |
| Ensure all staff have access to templates and resources | [ ]  |
| Familiarise yourself with the NWMPHN QI Toolkit! | [ ]  |

We are here to support you

If you would like further support from NWMPHN on preparing for the Quality Improvement Practice Incentive Payment, please send completed readiness tool above and specify below what specific support you would like. Then email to quality@nwmphn.org.au or fax to 03 9347 7433.

**Practice Name:**

**Contact Name:**

**Contact Role:**

**Phone number: Email:**

[ ]  Access to PENCAT

[ ]  PENCAT training and support

[ ]  Identifying practice population and patient needs

[ ]  QI tools and resources

[ ]  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_