

# **Practice Data Quality Reports**

## **Introduction to Practice Data Quality Reports**

The Practice Incentives Program Quality Improvement (PIP QI) Incentive was established to encourage practices to participate in quality improvement and to improve patient outcomes through the delivery of high-quality care.

Our Practice Data Quality Reports were developed to support practices to undertake continuous quality improvement activities in partnership with North Western Melbourne Primary Health Network (NWMPHN).

# What is covered in the Reports?

Practice Data Quality Reports contain de-identified practice data from the Pen CS clinical audit tool, CAT4 (Pen CAT). The Reports are sent to practices once per quarter.

The Reports give practices a visual overview of your population demographics and progress against the 10 PIP QI data measures:

- 1. Proportion of patients with diabetes with a current HbA1c result
- 2. Proportion of patients with a smoking status
- 3. Proportion of patients with a weight classification
- 4. Proportion of patients aged 65 and over who were immunised against influenza
- 5. Proportion of patients with diabetes who were immunised against influenza
- 6. Proportion of patients with COPD who were immunised against influenza
- 7. Proportion of patients with an alcohol consumption status
- 8. Proportion of patients with the necessary risk factors assessed to enable CVD assessment
- 9. Proportion of female patients with an up-to-date cervical screening
- 10. Proportion of patients with diabetes with a blood pressure result

The Reports also provide insight into how practices are tracking against the NWMPHN region average.

# **How to read the Reports**

#### Section 1:

This section provides an overview of your general practice's population demographics, including the breakdown of active patients by sex and ethnicity.

#### Section 2:

This section provides a detailed insight into how your practice is tracking against each of the ten PIP QI data measures by quarter and how the practice is tracking against the NWMPHN region average for that measure.

The final page contains a useful key to assist you to navigate and understand the Reports.

## What support is available?

- A "PIP QI Report meeting" with your QI Program Officer:
  - An opportunity for your practice team to go through your report in detail, ask
    questions and hear about your practice teams' achievements and potential areas of
    improvement.
  - Discuss how your data can be turned into meaningful quality improvement activities
- <u>PIP QI Ten Measures Improvement workbook</u>: A guide for general practices to support improvement activities for the PIP QI 10 measures and beyond.
- Quality Improvement Activities: Access self-directed improvement activities across a range of topic areas including Alcohol and Other Drugs, COPD, Diabetes, Cancer Screening, Chronic Disease Management, Prevention
- Quality Improvement Record: this simple and intuitive document makes it easy for you to record and review your QI activities. It is also very useful should you ever be audited, as it provides a record of your participation in quality improvement.
- CAT4 and Topbar resources
- HealthPathways Melbourne
- Over the phone or email support with your QI Program officer

### **Preventative Health Practice**

PIP QI measures 2, 3 and 7 focus on alcohol consumption status, smoking status, and weight classification – measures that can help your practice understand your patient population and the impact of preventable disease.

Fewer than one in three patients in our region have their current alcohol consumption status recorded and fewer than one in five patients in our region have weight classification recorded. Recording of alcohol and tobacco consumption and weight status helps keep our records up to date and encourages conversation about lifestyle risk factors with appropriate patients.

NWMPHN has developed several QI activities which can assist you in tackling improvement in this measure.

- PIP QI Measure 2: Increase smoking recording in your practice
- PIP QI Measure 3: Increase BMI recording in your practice
- PIP QI Measure 7: Increase alcohol recording in your practice

More information on our quality improvement program and toolkits is available on our website.

#### **Preventative Health Practice**

## Tips for increasing recording of risk factors:

- Install Topbar to help identify which patients do not have the necessary risk factors recorded.
- Include recording of smoking and alcohol consumption on the new patient registration form.
- Consider a team meeting and education session. Make sure everyone knows how to code data correctly.

#### **Resources:**

- A closer look at the BMI measure
- A closer look at the smoking measure
- A closer look at the alcohol measure

## **Case Study:**

• Improving alcohol status recording at Fawkner Health Care

If you have any questions or would like to schedule a virtual visit, please contact the NWMPHN Primary Health Care Improvement team on (03) 9347 1188 or email: <a href="mailto:primarycare@nwmphn.org.au">primarycare@nwmphn.org.au</a>

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Page 2 of 2 Date Printed: 16 May 2022