

The thing about quality: how and why ?

3rd General Practice Divisions Victoria
Conference

4 - 5 April 2003
Hotel Sofitel, Melbourne

Registration & Conference Program



Chief Sponsor



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Earlybird closes 21 February 2003

THE THING ABOUT QUALITY: HOW AND WHY?

KEYNOTE SPEAKERS



Professor Kieran Sweeney, Assistant Director, Policy and Development, Commission for Health Improvement, United Kingdom

Kieran Sweeney works as a General Practitioner, clinical research fellow at the Peninsula Medical School, and as Assistant Director of Policy at the Commission for Health Improvement (CHI), the organization responsible for improving the quality of patient care in the NHS. In the Commission, he was part of the team which developed the Primary Care Group review methods, and he participated in one of the first PCG reviews (in Norfolk) last year. His responsibilities in CHI are around primary care issues and evaluation of clinical governance reviews. His current research interests focus on the different disease models held by doctors and their patients, and how the language used in consultations reflects these different models. He is a former contributing health correspondent to *The Times*, and has produced three books. *The Human Effect in Medicine* and *A Practice Guide to Primary Care Groups and Trusts* were co-authored with fellow GP Michael Dixon. His third book, *Complexity and Healthcare: an Introduction*, co-edited with Dr Frances Griffiths, has recently been published.



Dr Harry Pert, General Practitioner, Rotorua, New Zealand

Harry Pert is a General Practitioner in Rotorua, New Zealand. He has been involved in the IPA (independent practitioners association) movement in New Zealand since its beginnings in the early 1990's and was the founder chairperson of the Rotorua IPA, the Rotorua General Practitioner Group (RGPG, www.healthrotorua.co.nz). He is a member of the Executive of the IPA Council of New Zealand, the national group representing IPAs. He has also been involved in a number of government health committees, with particular interest in health service organisation and quality, and was invited to participate in the Australian Commonwealth Government's Building on Quality project. He believes strongly in the benefits of Organised General Practice, and the importance of the profession leading the changes necessary to achieve better health for our communities and for enhanced general practice viability and professional satisfaction.



Dr Marie-Dominique Beaulieu, Professor, Doctor Sadok Besrouir Chair in Family Medicine, Department of Family Medicine, University of Montreal, Canada

Dr Marie-Dominique Beaulieu is a General Practitioner at the Centre hospitalier de l'Université de Montréal (CHUM) and holds the Research Chair (Doctor Sadok Besrouir Chair) in the Department of Family Medicine, University of Montreal. She was Chair of the Department of Family Medicine for three years. The Doctor Sadok Besrouir Chair was recently established with a mission to contribute to improving family medicine in Québec, Canada and internationally through research into access to the services of family physicians, integration and coordination of care, and the appropriate utilization of resources in family medicine. Dr Beaulieu is one of the senior investigators on a Policy Synthesis commissioned by the Canadian Health Services Research Foundation on the characteristics of effective primary healthcare models. She is also undertaking research to explore teams in the delivery of primary care. She has served on the Editorial Advisory Board of Canadian Family Physician. In 1991, she received the Donald I. Rice Award in recognition of her contributions to teaching, vision and leadership in the discipline.



Dr Chris Brook, Executive Director, Rural & Regional Health and Aged Care Services, Department of Human Services, Victoria

Chris joined Health Department Victoria in 1988 as its Chief Medical Officer. Since then he has held a variety of senior management positions covering regional management, public health, community services and from 1997 to 2001 was Director, Acute Health. In December 2001 he was appointed to the new position, Executive Director, Rural & Regional Health & Aged Care Services. This role carries operational responsibility for all rural and regional health and aged care services, and program responsibility for Aged Care, Public Health, Alcohol and Drugs, Primary and Community Health, Dental Health and Rural and Regional specific health program matters.

Chris trained as a specialist physician and later gained qualifications in public health medicine, and in medical administration. His interests include quality in health care, information system development, and privacy policy. Chris was President of the International Society for Quality in Health Care during 1998 and 1999 and is an honorary life member with that body for his services to its board over almost ten years.



Associate Professor Ian Anderson, Director of VicHealth Koori Health Research & Community Development Program, Victoria; Director of the Centre for the Study of Health and Society, Deputy Director of the Department of Public Health and Deputy Head of the School of Population Health, University of Melbourne.

Associate Professor Ian Anderson has worked in Aboriginal (Koori) Health for 15 years as an Aboriginal health worker, health educator and General Practitioner. He has served as CEO of the Victorian Aboriginal Health Service, then as Medical Adviser to the Office for Aboriginal and Torres Strait Islander Health in the Commonwealth Department of Health & Aged Care. Ian is Koori and has a professional background in medicine and social sciences. He has written widely on Aboriginal health, identity and culture.

As Director of the VicHealth Koori Health Research and Community Development Program, Ian leads an integrated health services research and community development program dedicated to bridging gaps in knowledge critical to the improvement of health care delivery to Koori people. Partnerships with Victorian Koori communities are critical to the success of this program.

SPECIAL GUEST SPEAKERS



**The Hon Bronwyn Pike MLA
Minister for Health, Victoria**



**Senator The Hon Kay Patterson
Minister for Health
Commonwealth of Australia**



8.00 – 9.00 Registration

9.00 – 9.30 Introduction to conference

Dr Nola Maxfield, Chair, General Practice Divisions Victoria
The Hon. Bronwyn Pike MLA, Minister for Health, Victoria

9.30 – 10.15 The idea of quality assurance in primary care trusts

Professor Kieran Sweeney, Assistant Director, Policy and Development, Commission for Health Improvement, UK

Primary care trusts have a number of features in common with divisions of general practice. In particular, they provide support and development services to local general practitioners and encourage collaboration between general practice and other health services. The purpose of this session is to discuss the idea of quality that governs the operation of the primary care trusts. How does the NHS ensure that primary care trusts provide an effective service? What ideas about quality of service are used to assess the way in which PCTs function and how does anyone know whether they are achieving their goals? What problems are there with quality assurance for this type of organisation? What ideas are being considered to improve quality assurance?

10.15 – 11.00 Quality assurance in New Zealand's independent practitioner associations

Dr Harry Pert, General Practitioner, Rotarua, New Zealand

The New Zealand equivalent of a division of general practice is the independent practitioner association (IPA). Most GPs are members of their local IPA, which provides a range of professional support and development services. The IPAs are also part of a primary care network of organisations. Who is responsible for ensuring that IPAs provide a high-quality service to members? What frameworks and systems are in place to ensure high standards? Can the IPAs provide examples of quality assurance systems and processes that could be usefully applied in Australia?

11.00 – 11.30 Morning tea

11.30 – 12.15 Assuring high quality in divisions of general practice

What does the term 'quality' mean when applied to divisions of general practice?
What are the indicators of high-quality performance in a division of general practice (or peak divisional body)?
What are the challenges to achieving and maintaining high quality?
What other organisations could/should divisions learn from in developing a framework for quality assurance?

The speaker for this session will be announced following the appointment of consultants to devise the quality and standards framework for divisions of general practice.

12.15 – 1.00 Panel discussion with all keynote speakers

1.00 – 2.00 Lunch

2.00 – 2.30 Plenary Session

Senator The Hon Kay Patterson, Minister for Health, Commonwealth of Australia

2.30 – 4.00 Concurrent sessions

Before selecting your preferred concurrent session please check the GPDV website for details of presenters for each session.

1. Learning from other industries

In this session participants will hear from two successful leaders in other industries about approaches to quality assurance. Following the presentations, discussion will focus on ways in which the ideas presented could be applied in divisions of general practice.

2. Quality in divisions

If divisions of general practice are to provide an effective service to their members they must have ways to ensure that their own structures and processes are of a high quality. In this session three divisions discuss their approach to quality assurance.

3. Systems for organisation

Traditionally general practice has been so focused on the individual that the concept of systems has been an alien one. The shift to an emphasis on population health has entailed a shift to thinking about systems for identifying and managing health risk, for patient reminder and recall, for monitoring infection control and immunisation etc.

What are the core practical systems for a high-quality general practice? And how is the quality of these systems monitored/measured? Do the current measures provide adequate feedback for quality assurance?

4. Information management

How well are divisions using information management processes? Are divisions' in-house systems for information management at a satisfactory standard? How are divisions performing in terms of support for information management at the practice level? What is the role of IT (which is not funded) in supporting IM (which is funded)?

5. Divisions supporting quality

Session 2 focuses on the quality of divisions as organisations. In this session three divisions of general practice analyse ways of supporting/enhancing quality improvement at the practice or local health service level.

4.00 – 4.30 Afternoon tea

4.30 – 5.30 Systems for quality

Dr Harold Shipman murdered more than 200 patients over a period of twenty-four years. He got away with it because no one held responsibility for monitoring the indicators of a practice's performance. Could it happen here? What systems are in place to monitor the quality of general practice in Australia? What indicators are currently being monitored? How effective are these systems and what are the loopholes? Who would know if an Australian doctor were trying to get away with murder?

This session will take the form of a panel discussion. Panel members will include representatives of organisations closely involved with standards and quality in general practice.

5.30 – 7.30 Cocktail Reception, Hotel Sofitel - Gather for fine cocktails and delicious hors d'oeuvres for a relaxed networking occasion

DAY TWO PUTTING THE THEORY INTO PRACTICE: THE QUALITY OF PARTNERSHIPS FOR HEALTH CARE

8.00 – 9.00 Registration

9.00 – 9.45 How does the term 'quality' apply to attempts to coordinate or integrate services from different parts of the health system?

Dr Marie-Dominique Beaulieu, General Practitioner at the Centre hospitalier de l'Université de Montréal (CHUM) and professor, Doctor Sadok Besrouir Chair in Family Medicine, Department of Family Medicine, University of Montreal

Is there a useful theoretical framework to analyse the effectiveness of collaboration between different organisations? How do we know when integration works? What does high-quality performance mean when we are speaking of integration? What systems support effective integration in primary care? This session will include discussion of Canadian examples of effective partnerships in primary health care services that may be useful as models for an Australian audience.

9.45 – 10.20 How effective is the collaboration between general practice and other parts of the health system in Victoria?

Dr Chris Brook, Executive Director, Rural & Regional Health and Aged Care Services, Dept of Human Services, Victoria

Effective collaboration assumes at a minimum that the collaboration will be in the interests of all the parties involved. Why is it important to DHS to establish a working relationship with general practice? Why do GPs and hospitals, GPs and primary care partnerships, GPs and mental health services need to work together? Which areas of collaboration appear to be working, which are not working? How does DHS assess the quality of the relationship? What are the indicators that tell DHS whether the relationship is working?

10.20 – 10.50 Morning tea

10.50 – 11.30 Partnerships for Aboriginal health

Associate Professor Ian Anderson, Director of VicHealth Koori Health Research & Community Development Program, University of Melbourne

The provision of quality primary health care for Aboriginal communities depends on effective partnerships between communities and health service providers who are not Aboriginal community members. How are divisions of general practice and individual general practices contributing to effective partnering? What are the impacts on quality of care? How would divisions and GPs know whether their efforts are appropriate and effective? What are the indicators of high-quality GP service provision from the perspective of Aboriginal communities? Are there examples in Victoria that serve as positive illustrations of cooperation leading to improved quality?

11.30 – 1.00 Concurrent sessions

Before selecting your preferred concurrent session please check the GPDV website for details of presenters for each session.

1. Using partnerships to address inequalities

What is the role of divisions in addressing inequalities? What strategies (involving divisions and other organisations) have worked in areas with low socio-economic status and high mortality and morbidity? How can local partnerships facilitate equality of access to health services? When local services are inadequate what is the role of the division vis-à-vis councils, local communities and DHS in representation, advocacy and planning?

2. Coordination & collaboration in primary care

Since the establishment of divisions, there have been many attempts to improve the coordination of care between general practice and other parts of primary care. Many of these efforts fail – maybe because the cultural differences are too great or the incentives are wrong or for some other reason. This session provides examination of two successful attempts and looks at some recent research into how GPs work together with other primary health providers.

3. Hospital systems that promote coordination of care

Coordination of care between GPs and hospitals has been one of the main concerns of divisions of general practice. What have we learnt about the systems that best support GP– hospital coordination of care? What does the implementation of Enhanced Primary Care tell us about the strengths and weaknesses of GP– hospital liaison? What sort of communication systems contribute to effective coordination of care?

4. General Practice Liaison Officers – a review of the role

The role of GP liaison officer has been a controversial one. What models of GPLO are in place in Victoria? What are the pros and cons of the different models? Should the GPLO be employed by the hospital or by the division? How does the GPLO interact with the division and what systems support this process? Does effective GP– hospital liaison require cultural change on the part of hospitals and/or divisions? What is the evidence?

5. Effective integration: some key components

After 10 years, what have we learnt about what works best to achieve successful GP links with other parts of the health system? What is required to sustain integration? How should the partners in an integrated program be supported? How significant is a focus on the core business of each of the organisations involved? Through discussion of practical examples, speakers in this session

1.00 – 2.00 Lunch

Guest speaker: Sir Murray Rivers QC (Retired) is one of Australia's most controversial legal and political figures. He is a former Victorian Supreme Court Judge and an outspoken media commentator on ABC Radio. Currently he is Senior Advisor to the Howard Government on Race Relations – and other matters affecting the Australian Racing Industry. Sir Murray is currently touring the colony addressing the nation's corporate sector as to why the voters must listen to the Government, and not the other way around!

2.00 – 3.30 Debate: Quality assurance is about form rather than substance

There are many opponents of quality assurance techniques. The opponents generally argue that the real quality of service is not affected by quality assurance techniques – that only the surface features of service delivery such as the appearance of the waiting room change while the quality of diagnosis, for example, remains the same. In the closing session keynote speakers and local GPs will debate the pros and cons of quality assurance systems in health.

3.30 Conference close

THE THING ABOUT QUALITY: HOW AND WHY?

Friday 4 April – Saturday 5 April 2003

Hotel Sofitel Melbourne

REGISTRATION BROCHURE AND PROGRAM

Message from the Chair



Our third conference is about quality and systems in general practice and also in the organisations that provide support and development to general practice - primary care trusts in the UK, divisions of general practice in Australia and independent practitioner associations in New Zealand. The first day of the conference is about quality and systems in these organisations, and about ways that divisions can support quality improvement at the practice level.

Anyone associated with general practice these days is asked to promote teamwork between GPs and other parts of the health system. Accordingly, the second day of our conference is about how the idea of quality applies to partnerships between general practice and others.

We have a program of expert national and international speakers to bring a variety of perspectives to bear on these questions. As with our last conference we have invited the State and Commonwealth Health Ministers to ensure that they remain aware of issues important to Victorian GPs and divisions.

We have been delighted with the expressions of interest in the concurrent sessions and due to the limited number of places have had to refuse some excellent proposals.

Our hope for each conference is that we provide an opportunity for divisions to participate in discussion of the broad issues affecting general practice. We have maintained the cost at a very reasonable level to enable maximum participation from division boards and staff. As much of the discussion is about working with others we strongly encourage participation from DHS, hospitals, primary care organisations and all with an interest in quality in general practice.

Welcome to the third GPDV conference.

Dr. Nola Maxfield
Chair GPDV



CONFERENCE ORGANISING COMMITTEE

Dr Sharon Monagle, Committee Chair & GPDV Board member

Bill Newton, CEO, GPDV

Dr David Tillett, GPDV Board member

Dr Rob Grenfell, GPDV Board member

Dr Richard Hince, Inner Eastern Melbourne Division of General Practice

Andrew Howard, CEO, Ballarat Division of General Practice

Helen Threlfall, Consultant, GPDV

Sue Gillard, CLEMS (Conference Links and Event Management Services)

Christine Macdonald, External Consultant: Program Development Coordinator

Eliza Sanneman, GPDV, Administrative Support

EARLY BIRD

Save \$90 Register before 21 February 2003

ACKNOWLEDGEMENT OF REGISTRATION

All registrations will be acknowledged upon receipt of full payment. The registration form attached acts as a Tax Invoice. Registration will not be processed unless accompanied by payment in full.

PAYMENT

Full payment should accompany registration forms, with cheques made payable to "GPDV". Please print your name and company name on the back of cheques. Please note all prices are GST inclusive.

CONFERENCE CANCELLATIONS/REFUNDS

All cancellations must be notified in writing to the Conference Organisers. Cancellations received by 20 March 2003 will be accepted and fees refunded less \$100.00 administration fee. Cancellations after this date cannot be accepted, however transfer of registration to another person will be accepted. All cancellations must be notified in writing to the Conference Organisers.

ACCOMMODATION TERMS & CONDITIONS

Delegates who wish to book accommodation at any of the listed hotels must complete the appropriate section of the Registration Form and should indicate a second preference. Whilst every endeavour will be made to accommodate you at your first choice of venue, this cannot be guaranteed. Should this not be possible, your second choice of venue will be allocated. The special Conference rates quoted cannot be guaranteed when delegates are making their own booking direct with the hotel.

A deposit of one night's tariff per room is required to secure a hotel accommodation booking and must accompany the registration form. No accommodation booking will be accepted unless accompanied by a deposit. Delegates must settle the balance of their account with the hotel concerned on checkout. Any change to a reservation must be forwarded in writing to the Conference Organiser, not directly to the hotel. Unless notification of accommodation cancellation is received in writing thirty days prior to the booking commencement date, the accommodation deposit will be forfeited in all instances. The standard check-in time at hotels is 2.00pm onwards. If a room is required prior to this time, the Conference Organiser should be advised. Hotels may otherwise charge an additional days' fee. Delegates arriving after 6.00pm should indicate their estimated time of arrival on the registration form. If the hotel is not aware of late arrival, the room may be released to other patrons.

SESSION BOOKINGS

GPDV will endeavour to provide adequate seating for all sessions. Indication of sessions in no way guarantees seating. Delegates are advised to attend sessions early as seating will be allocated on a first come basis.

REGISTRATION AND INFORMATION DESK

This will be located on the first level of the Hotel Sofitel and will open at 8.00am both mornings.

NAME BADGES

As a delegate you will receive a name badge upon registration. This is your official pass and must be worn in order to obtain entry to all Conference sessions and social occasions.

CAR PARKING

Car parking is available under the Hotel in Wilson's car park. ENTER via Flinders Lane. Early bird approximately \$14.00 per vehicle per day.

INSURANCE

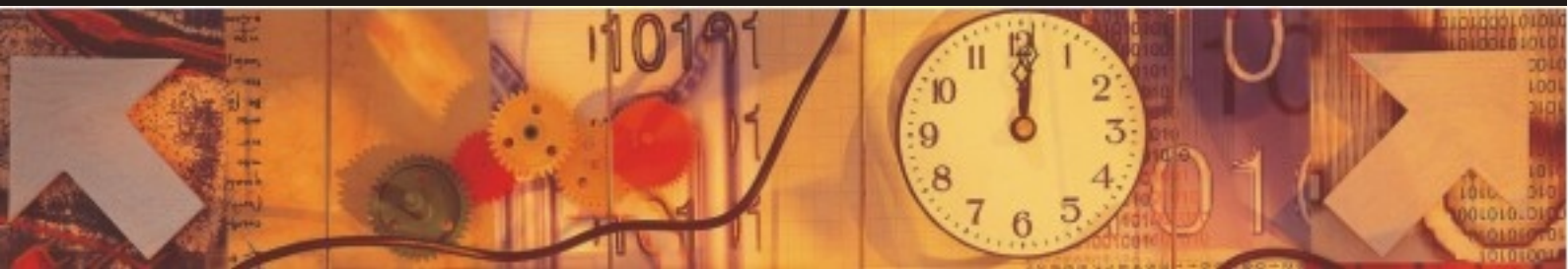
Registration fees do not include personal travel or health insurance of any kind. It is strongly recommended that when registering for the Conference and booking travel that delegates make arrangements for appropriate travel and health insurance. The Organising Committee and the Conference Organisers do not take responsibility for any delegate failing to insure.

TRADE EXPO

Throughout the conference, delegates will be browsing our Expo on the look out for the latest products and services that the industry has to offer. If you wish to participate, it's a chance to promote your offerings to over 450 interested potential customers around Australia. Want to be an exhibitor? For further information about the Expo and cost for exhibiting, please contact the Conference Organisers, CLEMS (Conference Links & Event Management Services) 60 Barry Street, Carlton Vic, 3053 Tel: 03 9439 3855 Fax: 03 9431 5167 Email: clems.sg@bigpond.com

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www.betterhealth.vic.gov.au

Conference Secretariat

CLEMS

(Conference Links & Event Management Services)

60 Barry Street, Carlton, Victoria, 3053

Tel: 03 9439 3855 Fax: 03 9431 5167

Email: clems.sg@bigpond.com

THE THING ABOUT QUALITY: HOW AND WHY?

Friday 4 April – Saturday 5 April 2003 Hotel Sofitel Melbourne

REGISTRATION FORM & TAX INVOICE

ABN 80 081 371 968

WHEN COMPLETED, THIS FORM ACTS AS A TAX INVOICE

A SPECIAL EARLY BIRD RATE is available until Friday 21 February 2003

Full registration includes two-day conference, delegate satchel, conference program, cocktail reception, all lunches, morning and afternoon refreshments and entry to trade exhibition.

Register online at **www.gpdv.com.au** or complete the registration form and return with payment to our Conference Organiser:

CLEMS

60 Barry Street, Carlton, Victoria, 3053

Tel: 03 9439 3855 Fax: 03 9431 5167

Email: clem.s.sg@bigpond.com

CONCURRENT SESSIONS

To assist with planning, please indicate your preferred sessions below. Details of presenters for each session are available on the GPDV website.

Friday 4 April 2003: 2.30 - 4.00pm

(Choose one)

1. Learning from other industries ☐
2. Quality in divisions ☐
3. Systems for organisation ☐
4. Information management ☐
5. Divisions supporting quality ☐

Saturday 5 April 2003: 11.30 - 1.00pm

(Choose one)

1. Using partnerships to address inequalities ☐
2. Co-ordination & collaboration in primary care ☐
3. Hospital systems that promote co-ordination of care ☐
4. General Practice Liaison Officers: a review of the role ☐
5. Effective GP-hospital links: theory and practice ☐

REGISTRATION FEES

	Earlybird by 21 Feb 2003	After 21 Feb 2003
Full Registration	\$400.00	\$490.00
Day Registration Day 1	\$300.00	\$350.00
Day Registration Day 2	\$250.00	
Group Registration	\$375.00	

Group Registration - Full Registration from the same organisation of 4 or more delegates attracts a \$25.00 discount per registration.

Cocktail Reception - 4 April included in Full Registration fee.

No of additional tickets at \$65.00 per person (Number)

Name
(as you wish to appear on your name tag)

Title

Position

Organisation

Address

State Postcode

Phone Fax

Email

Special requirements (dietary/physical disabilities etc)

PAYMENT: Fill in your details

Registration Fee \$

Additional Cocktail Reception Tickets
(Reception incl with full registration) \$

Accommodation Deposit

Hotel Sofitel (\$250.00)

Stamford Plaza (\$191.00) or (\$291.00)

Mecure Hotel (\$138.00) \$

Amount Payable (incl of GST) \$

ACCOMMODATION

The following special rates have been negotiated with leading local providers to ensure delegates have accommodation options that suit their needs and budget. All are conveniently located within a short walking distance of the venue. (Prices quoted per room per night)

Hotel Sofitel - 5 star ☐
25 Collins Street, Melbourne
Single/Twin/Double **\$250.00**

Stamford Plaza - 4.5 star ☐
111 Little Collins Street, Melbourne
One Bedrm Suite (Single Twin Double) **\$191.00**
Two Bedrm Suites (Sleeps Two Doubles) **\$291.00**

Mecure Hotel - 3.5 star ☐
13 Spring Street, Melbourne
Single/Twin/Double **\$138.00**

(Tick Hotel Choice)

CHECK IN **CHECK OUT** **TOTAL NIGHTS**

If sharing please indicate the name/s of the person/people with whom you are sharing.

Please indicate your second choice of hotel in case your first choice is unavailable

PAYMENT METHOD

Full payment must accompany your registration. Please make your cheques payable to GPDV. Payment can also be made by credit card

Cheque ☐ Bankcard ☐ Mastercard ☐ Visa ☐

Cardholder Name Card Number
(Print)

Cardholder's Signature Expiry Date