

PRIORITY AREA 3: ACCESS

Objective Description

Domain	National Objective	Rationale
RESIDENTIAL AGED CARE	Divisions will facilitate access and support general practices/GPs to provide optimal care and contribute to the achievement of the best possible health outcomes for older people living in residential aged care facilities (RACFs).	Older people living in RACFs should have access to quality medical care at the same standard that applies to the community generally, and that meets their specific medical needs. There has been a decline in GP attendances to residential care patients in the context of an ageing population, increased numbers of residential aged care beds and an increased proportion of residents classified as high care. Divisions have a key role in improving access to appropriate general practice services for older people living in RACFs.

National Performance Indicators

Level	Indicator	Results for the reporting period	Explanatory Text	Points
1	N_RES 1.1 Division collaborates with RACFs, service providers and consumer/carer groups to facilitate access to general practice services for residents of RACFs within the Division's boundaries.	Table N_RES 1.1		2 points (compulsory)
	N_RES 1.2 Division takes a systematic approach to support GPs visiting RACFs to provide optimal care to RACF patients.	Aim: Actions Taken: Outcomes:		2 points (compulsory)
	N_RES 1.3 Division facilitates access to effective Continuing Professional Development (CPD) for the care needs of RACF patients.	N_RES 1.3 (1) We undertook [insert type of CPD activity] on [insert residential aged care topic#; specify focus where appropriate] Comments: N_RES 1.3 (2) We facilitated access to [insert type of CPD activity] on [insert residential aged care topic#; specify focus where appropriate] provided by [insert provider]. We facilitated access by [insert activities]. Comments:		2 points
2	N_RES 2.1 Number and proportion of general practices whose GPs visit RACFs using register/recall/reminder systems to identify RACF patients for review and appropriate action.	Table N_RES 2.1		4 points
	N_RES 2.2 Number and proportion of general practices providing written patient information appropriate for their patient population about the nature and extent of their availability for RACF visits.	Table N_RES 2.2		4 points
3	N_RES 3.1 Number of: i) GP consultations in RACFs; ii) comprehensive medical assessments (CMAs); iii) residential medication management reviews (RMMRs), provided by GPs practicing in the Division's area, compared to the number of RACF beds in the Division's area.	Table N_RES 3.1		8 points (compulsory)
4	N_RES 4.1 Number and proportion of RACFs satisfied with general practice involvement in their RACF.	Table N_RES 4.1		16 points

PRIORITY AREA 3: ACCESS

Strategies and key activities for this objective

Strategic approaches adopted to achieve this objective	Key activities within chosen strategic approaches in current year
Divisions utilise the funding under the Strengthening Medicare Aged Care GP Panels Initiative to develop processes and structures within general practice and the aged care sector that lead to improved access for residents of RACFs.	Survey GPs and ACHs to determine barriers and enablers to service provision, identify areas for improvement and identify activities to address same.

Reflection on work towards this objective

Notable achievements and key contributing factors	
Notable challenges and key contributing factors	
What did the Division learn from the strategic approaches used?	
How were community needs met?	
Recommendations	

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Objective Description

Domain	National Objective	Rationale
RESIDENTIAL AGED CARE	Improved access to appropriate medical care for all aged care residents	Aged Care Homes have been finding it increasingly difficult to keep the services of general practitioners who can provide regular consultations for residents. This is especially the case where a resident does not have a regular doctor. Evidence about the nature and extent of the difficulties surrounding the provision of GP services to residents of RACFs is limited. However, MBS data suggests that services are provided by a small proportion of GPs and that this proportion is shrinking.

National Performance Indicators

Level	Indicator	Results for the reporting period	Explanatory Text	Points
4.1	Aged care homes' advice that access to GP services has improved			TBA
3.1	Increase in number of GP services provided to residents of aged care homes			TBA
3.1	Increase in number of GP services provided to residents as a proportion of aged care beds			TBA
1.1	Increase in the number of residential aged care GP services as a ratio to Full Time Equivalent GPs.			TBA
1.1	The age and gender of GPs providing residential aged care services in the Participant's region is more comparable with the national average.			TBA

Strategies and key activities for this objective

Strategic approaches adopted to achieve this objective	Key activities within chosen strategic approaches in current year
Division works in partnership with key aged and community care stakeholders to establish linkages, determine priority action and improve access to quality medical care.	Promotion and dissemination of information outlining MBS Items available to GPs providing services in residential aged care facilities (RACFs). Development of user friendly electronic (and manual) streamlined forms for use by GPs and RACFs in the facility. Source, support, mentor GPs to provide services to residents of ACHs to improve access by residents to general practice services. Consult with GPs & RACFs to identify barriers and enablers to general practitioner services for RACF residents Investigate and develop systems to improve access to medical care for residents of aged care homes. Division develops a communication strategy – division with GPs & RACFs and GPs and RACFs. Assist in the development of communication protocols between GPs and ACHs.

Reflection on work towards this objective

Notable achievements and key contributing factors	
Notable challenges and key contributing factors	
What did the Division learn from the strategic approaches used?	
How were community needs met?	
Recommendations	

PRIORITY AREA 3: ACCESS

Objective Description

Domain	National Objective	Rationale
RESIDENTIAL AGED CARE	Increased participation of GPs in aged care initiatives aimed at improving quality of care	Anecdotal evidence suggests that linkages between aged care homes and general practice are sub-optimal, and the consequences include ineffective management of chronic conditions leading to otherwise avoidable acute episodes and poor access of aged care home residents to appropriate urgent and after hours medical care.

National Performance Indicators

Level	Indicator	Results for the reporting period	Explanatory Text	Points
1.2	Increase in the proportion of aged care homes that have general practitioner involvement in their quality improvement activities			TBA
4.1	Increase in aged care homes' satisfaction with the outcomes of general practitioner involvement in their quality improvement activities.			TBA

Strategies and key activities for this objective

Strategic approaches adopted to achieve this objective	Key activities within chosen strategic approaches in current year
Develop appropriate and sustainable structural approaches to assist in the engagement of GPs in quality activities.	Facilitate communication between DGPs, GPs and ACHs including but not limited to the GP Aged Care Panels. Identification of GPs and aged care staff needs / issues within RACFs. - Agreed priorities for professional development - Development of issue resolution and quality improvement protocols and activities Develop a mechanism to address local issues. - Protocols for GP access and care planning - Agreed protocols for 'out of hours' GP callout and access. - Protocols for communication for shared care planning Source and develop processes / protocols / resources to streamline GP involvement in RACFs Assist RACFs to recruit GPs to medication / medical advisory committees Examine issues of quality use of medicines in RACFs (locally or via GP aged care panel). Education of GPs in RACF requirements for accreditation. Develop communication and clinical pathways for patients moving between ACHs and acute care.

Reflection on work towards this objective

Notable achievements and key contributing factors	
Notable challenges and key contributing factors	
What did the Division learn from the strategic approaches used?	
How were community needs met?	
Recommendations	

PRIORITY AREA 3: ACCESS

Objective Description

Domain	National Objective	Rationale
RESIDENTIAL AGED CARE	GPs and Divisions working more effectively with aged care homes	There is no specific funding for RACFs under this initiative. However, Divisions are encouraged to promote the dual benefits of the initiative to the aged care sector. Collaboration and communication between divisions, GPs and RACFs will enable the development of flexible solutions to improve access to high quality care for aged care home residents and support and advice for staff.

National Performance Indicators

Level	Indicator	Results for the reporting period	Explanatory Text	Points
1.1	Communication and partnerships are established and maintained between general practitioners and aged care homes			TBA
1.1	Aged care homes and general practitioners are working effectively together to improve access to medical care for residents of aged care homes.			TBA
1.1	Aged Care homes' advice that Aged Care GP Panel is undertaking work to address key concerns.			TBA
1.2	Key priorities to address needs within the Divisions boundaries have been identified			TBA
1.2	Aged Care GP Panel is operational			TBA
	Transparent and accountable processes for Aged Care GP Panel member selection and appointment is established and maintained.			TBA
	The Aged Care GP Panel model is built on and amended in light of the Initiatives development.			TBA

Strategies and key activities for this objective

Strategic approaches adopted to achieve this objective	Key activities within chosen strategic approaches in current year
Integration of general practice sector, aged care sector and allied health professionals with regard to service provision in RACFs.	- Provision of information to GPs and ACHs and relevant allied health providers via identified and agreed mediums e.g. dedicated fax stream DGP newsletter - Support GPs and ACHs to participate in panel initiative. - RACFs involved in the recruitment of GPs to 'Panel'. - DGP, GPs and ACHs develop terms of reference and action plan under panels initiative. - Support collaborative meetings between the sectors. - Participation of RACFs in appropriate activities. - Increase numbers of participating GPs and ACHs during the 'life' of the initiative. - Promote the work being conducted / produced under the initiative. - Promote streamlined practices between the DGP, GPs and RACFs. - Build a sustainable GP aged care program

Reflection on work towards this objective

Notable achievements and key contributing factors	
Notable challenges and key contributing factors	
What did the Division learn from the strategic approaches used?	
How were community needs met?	
Recommendations	

PRIORITY AREA 3: ACCESS

Objective Description

Domain	Related Local Objective	Rationale
RESIDENTIAL AGED CARE		

Local Performance Indicators

Indicator	Results for the reporting period	Explanatory Text

Strategies and key activities for this objective

Strategic approaches adopted to achieve this objective	Key activities within chosen strategic approaches in current year

Reflection on work towards this objective

Notable achievements and key contributing factors	
Notable challenges and key contributing factors	
What did the Division learn from the strategic approaches used?	
How were community needs met?	
Recommendations	