



Aged Care
GP Panels Initiative
A National Overview
GPDV Workshop
Friday 9th September 2005

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Australian Divisions of General Practice



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Agenda

- Government expectations – How are we tracking?
- What are the panels big issues?
- Successes
- What's happening with the 12 month Review?



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The Departments expectations.

**(1) All Divisions have an
operational panel.**

ACHIEVED

222 Panels & 1192 GPs

(at 15th May 2005)

**100% of Divisions of General
Practice have one or more
established panels.**



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Panel Models

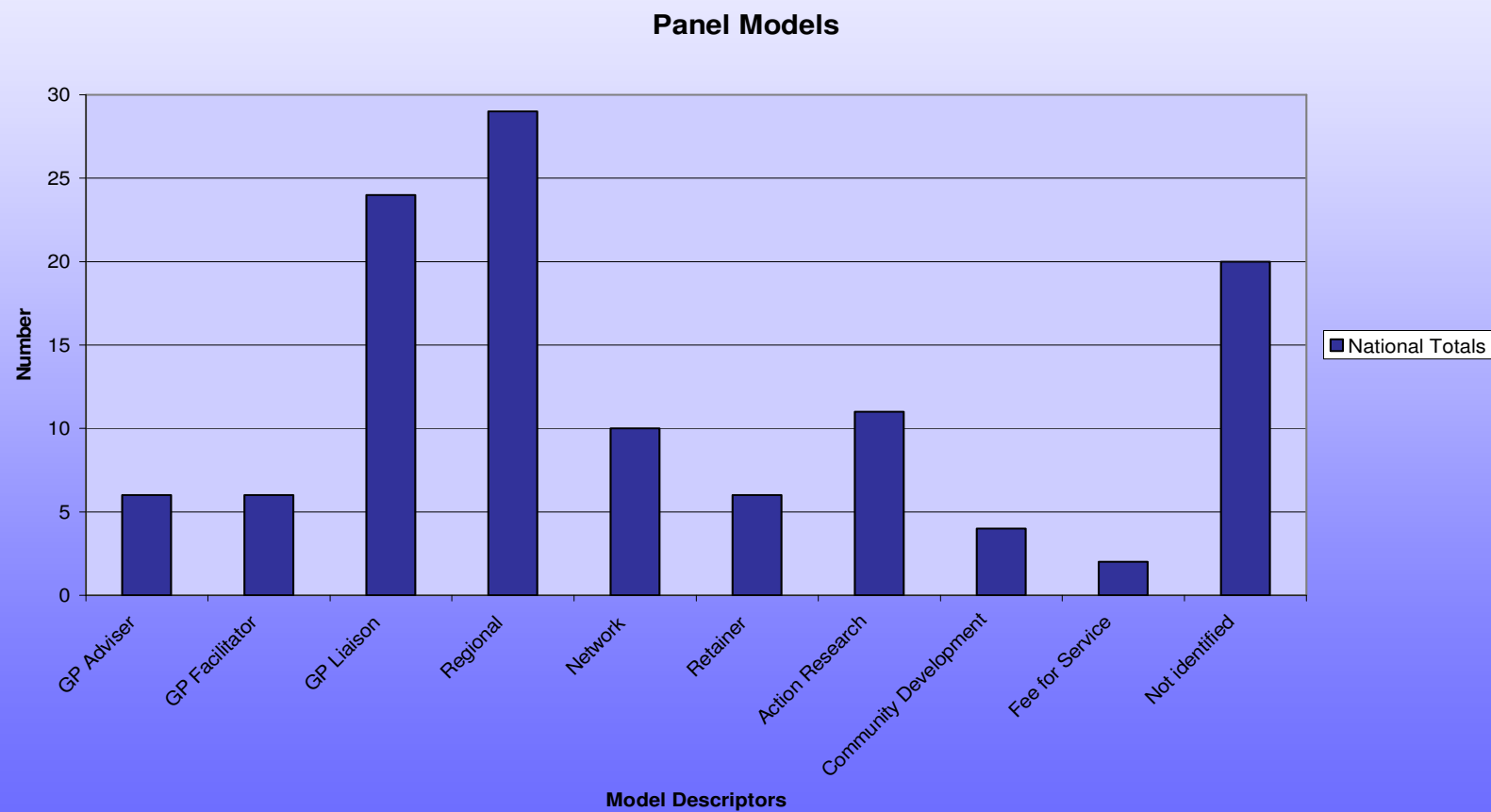
The models currently employed under the initiative can be broadly categorised into nine key headings.

- GP Adviser;
- GP Facilitator;
- GP Liaison;
- Regional;
- Network;
- Retainer;
- Action Research;
- Community Development; and
- Fee for Service



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Panel models & numbers National Figures



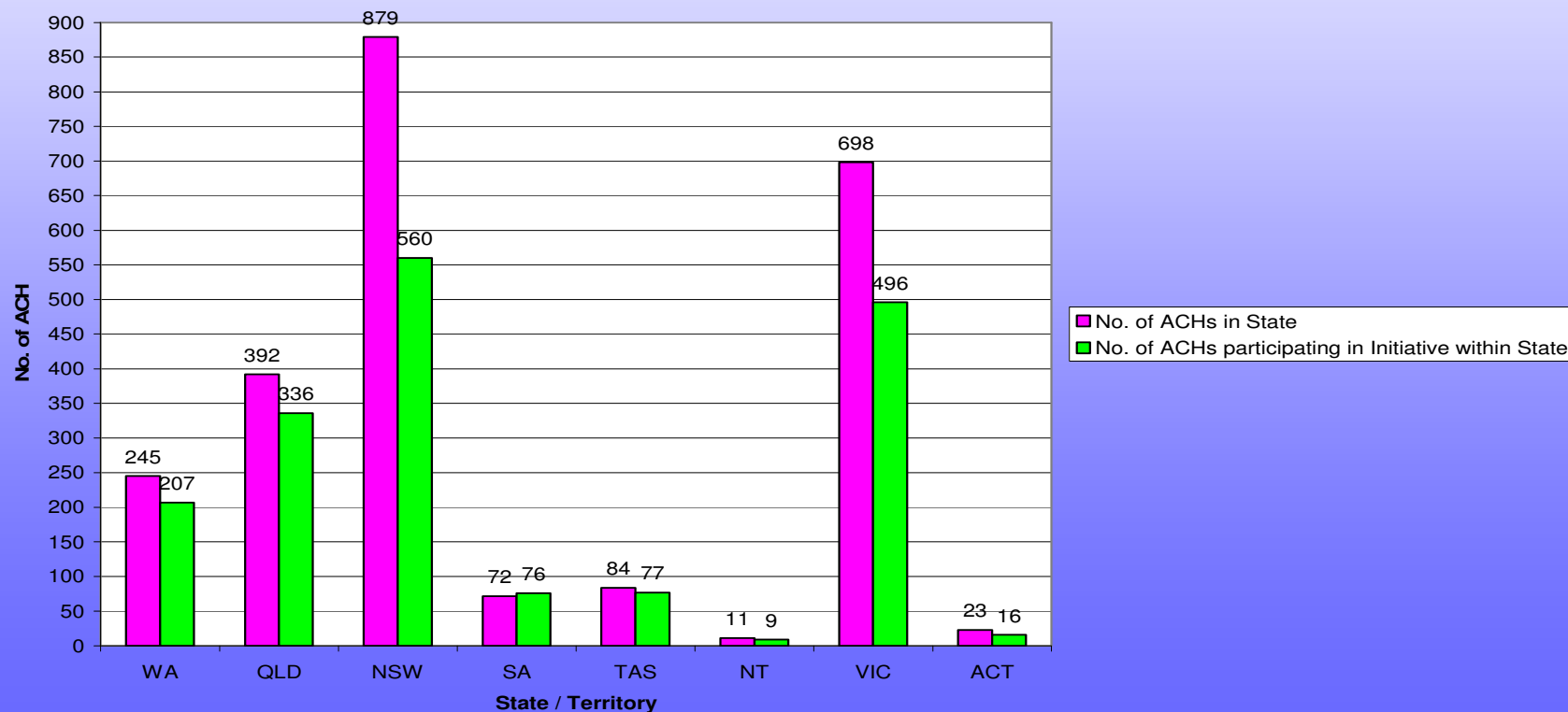


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The Departments expectations:
(2) Divisions engage all willing aged care homes.

Well on the Way to being achieved
Approximately 60% of RACF participating

Aged Care Home Participation in GP Panels Initiative





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The Departments expectations. (3) GPs increased participation in quality activities.

Excellent Progress being made

75 Divisions have reported GP involvement in
RACF quality activities.

Quality Care Committees and Activities include:

- Medication Advisory & Management Committees
- Hospital in the Nursing Home
- Health promotion activities
- Streamline communications, processes and practices between the key stakeholders including emergency departments and rehabilitation facilities



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What are the panels big issues?

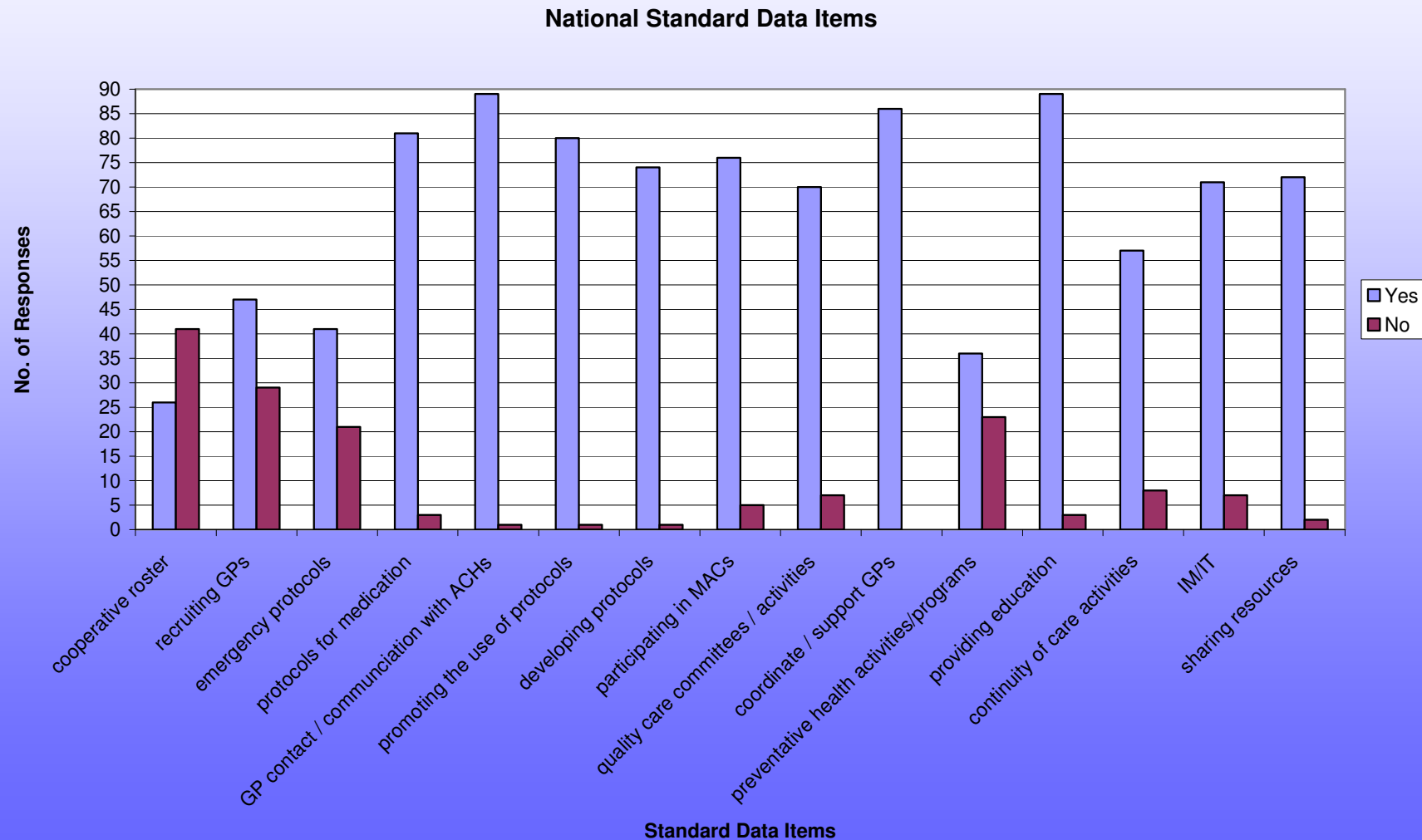
Information collated for the purposes of the ADGP Models Implementation report, indicates that panels have chosen to undertake considerable work in the following areas:

- Education and training (75% of Divisions);
- Communication & Policy (75% of Divisions);
- Medication Management (68% of Divisions);
- IM/IT (60% of Divisions); and
- Quality Care Committees & Activities (64% of Divisions using MACs & 59% Divisions using other activities).



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What are panels addressing? Tracking against the Departments SDI's





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A measure of success

The Department is using MBS data as one measure of success under this Initiative. Divisions have a number of performance indicators relating to increases in:

- Number of services being provided to residents of aged care homes
- Number of GP services provided to residents of aged care homes as a proportion of aged care beds
- Number of residential aged care GP services as a ratio to full time equivalent GPs
- Age and gender of GPs providing those services



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Results against the Department's measures of success:

Performance Indicator 1:

Increase in number of GP services provided to residents of aged care homes

	No. of aged care services	% increase on previous year
	National	National
Six month data		
July - Dec, 2003	873,856	N/A
Jan - June, 2004	882,713	N/A
July - Dec, 2004	927,656	6.2%
Jan - June, 2005	892,432	1.1%
Annual data		
2002-03	1,671,202	N/A
2003-04	1,754,688	5.0%
2004-05	1,818,944	3.7%



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Results against the Department's measures of success:

Performance Indicator 2:

Increase in number of GP services provided to residents as a proportion of aged care beds

	No. of aged care services per bed	% increase on previous year
	National	National
Six month data		
July - Dec, 2003	6	N/A
Jan - June, 2004	6	N/A
July - Dec, 2004	6	6.2%
Jan - June, 2005	6	-0.7%
Annual data		
2002-03	11	N/A
2003-04	11	0.6%
2004-05	12	1.8%



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Results against the Department's measures of success:

Performance Indicator 3:

Increase in the number of residential aged care GP services as a ratio to Full Time Equivalent (FTEs)

	No. of aged care services per FTE	% increase on previous year
	National	National
Six month data		
July - Dec, 2003	108	N/A
Jan - June, 2004	108	N/A
July - Dec, 2004	108	0.4%
Jan - June, 2005	110	1.9%
Annual data		
2002-03	184	N/A
2003-04	195	6.3%
2004-05	201	3.0%



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Results against the Department's measures of success:

Performance Indicator 4:

The age and gender of GPs providing residential aged care services in the Division's region is more comparable with the national average

	Proportion of GPs that are female (%)	% increase on previous year
	National	National
Six month data		
July - Dec, 2003	28	N/A
Jan - June, 2004	28	N/A
July - Dec, 2004	29	2.7%
Jan - June, 2005	29	2.7%
Annual data		
2002-03	29	N/A
2003-04	30	1.6%
2004-05	30	1.7%



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Results against the Department's measures of success:

Performance Indicator 4: The age and gender of GPs providing residential aged care services in the Division is more comparable with the national average.

	Proportion of GPs aged 55+ (%)	% increase on previous year
	National	National
Six month data		
July - Dec, 2003	29	na
Jan - June, 2004	31	na
July - Dec, 2004	30	4.5%
Jan - June, 2005	32	5.6%
Annual data		
2002-03	27	na
2003-04	27	1.4%
2004-05	29	5.5%



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Divisions Successes

- Improved aged care home and GP communication;
- Strengthening of partnerships;
- Identifying issues, barriers and enablers to working in aged care homes;
- Medical Director trials;
- Development of various guidelines;
- After hours checklist;
- MBS Items checklist;
- MBS Items Kit for GPs and aged care homes;
- Education sessions for GPs on MBS items especially CMA and RMMR;
- GP champions;
- Aged Care GP Panels Newsletters;
- Medical Director installed in aged care homes;
- CPD activities;
- Orientation of aged care home nurses to general practice nursing;
- Emergence of regional networks;
- Strengthened partnerships between GPs, ACHs and Pharmacists;
- Improved access to geriatricians especially with regard to education opportunities; and
- Pilots / trials in the use of standardised medication charts.



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12 month Review Process

- DoHA develops Discussion Paper (June 2005)
- Discussion Paper circulated to Divisions Network (1 July 2005)
- Collated and analysed by ADGP (5 August 2005)
- *MedicarePlus* Aged Care Initiatives Implementation Advisory Group meets to discuss and finalise recommendations for changes to the Initiative (28 September 2005)
- Changes circulated to the Divisions Network and key stakeholders (October 2005)



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12 month Review – What the Network said.

Split between GP Remuneration and Division Support Funding

	No. of Respondents
1.1 Remove the separation between GP remuneration & Division support funding	29
1.2 Merged funding streams with 30% minimum GP remuneration component	24
1.3 Allow up to 50% of GP Funds to be used in a flexible way	24
1.4 Leave the funding streams in the ACGPPI unchanged	4

Performance Indicators

	No. of Respondents
2.1 Choice for Divisions on data collection	11
2.2 Change for all Divisions on data collection	37
2.3 Reduce Panel indicators	24
No Comment	1



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12 month Review – What the Network said.

Participation of Geriatricians

	No. of Respondents
3.1 Enhancing the role of Geriatricians	55
3.2 Remote membership of panels by geriatricians	21
Other	2
Neither	1

Good Models Good Practices

	No. of Respondents
4.1 Enhancing the role of SBOs	41
4.2 Creation of a national clearing house of divisions resources	23
Other	3
No comment	2
Neither	5



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Questions?

