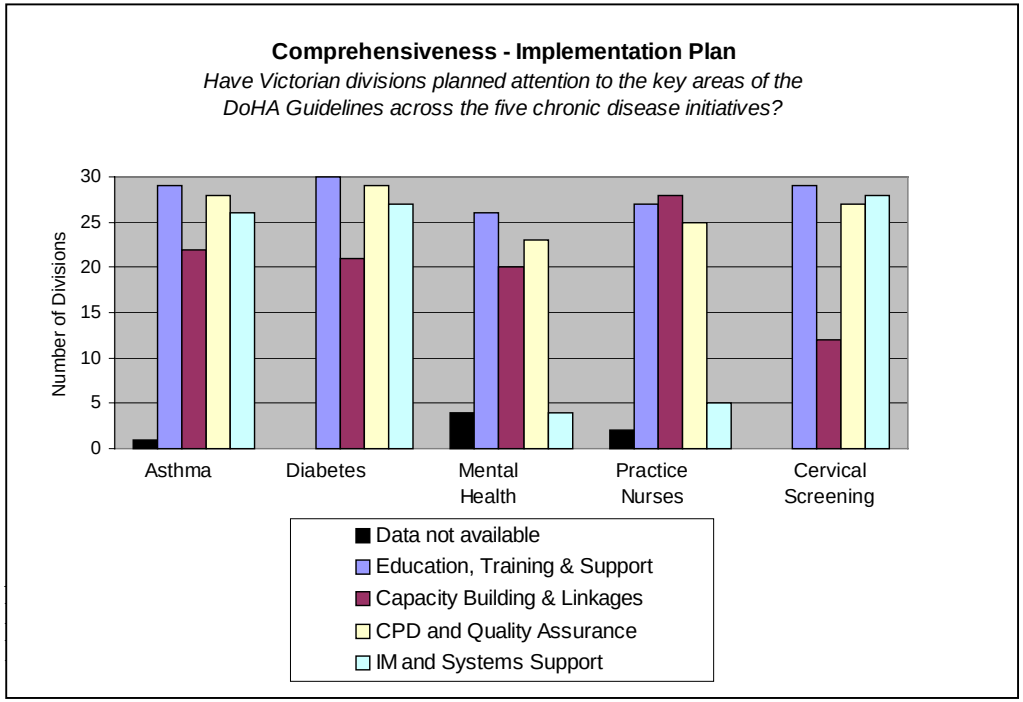
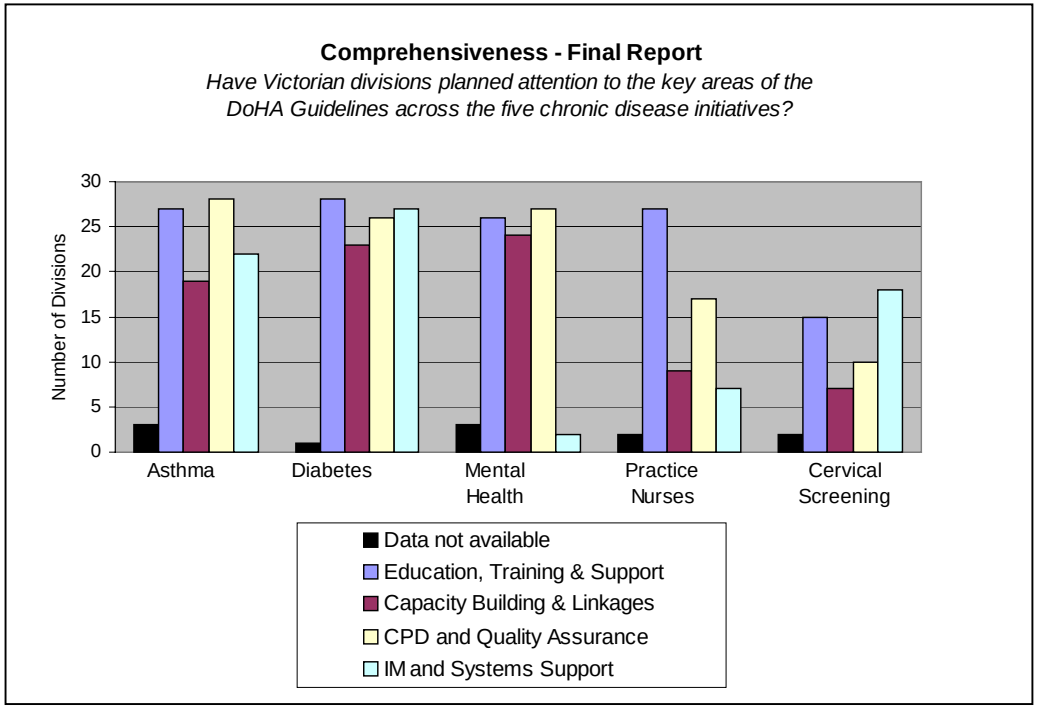
5 DIVISION LEVEL ACTIVITY

5.1 COMPREHENSIVENESS

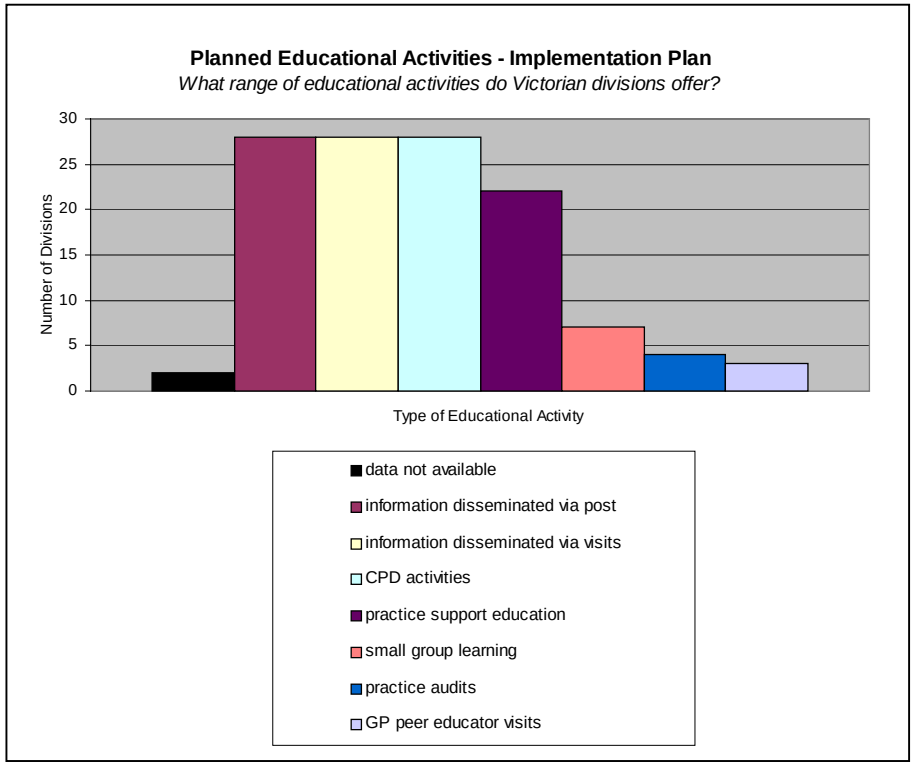
GPDV has explored how divisions are progressing toward achieving a comprehensive approach in the delivery of their chronic disease management plan. In our analysis of the implementation plans, divisions planned to cover each component of the CDM initiative and all four key activity areas. The plans demonstrated that most divisions intended to undertake appropriate tasks against each initiative. We note that cervical screening appears to have missed out as a focus for divisions. We expect that this may change in the future following the introduction of the outcomes payment in May 03. More activity than was expected was undertaken in Mental Health, probably because of the Allied Health pilots.

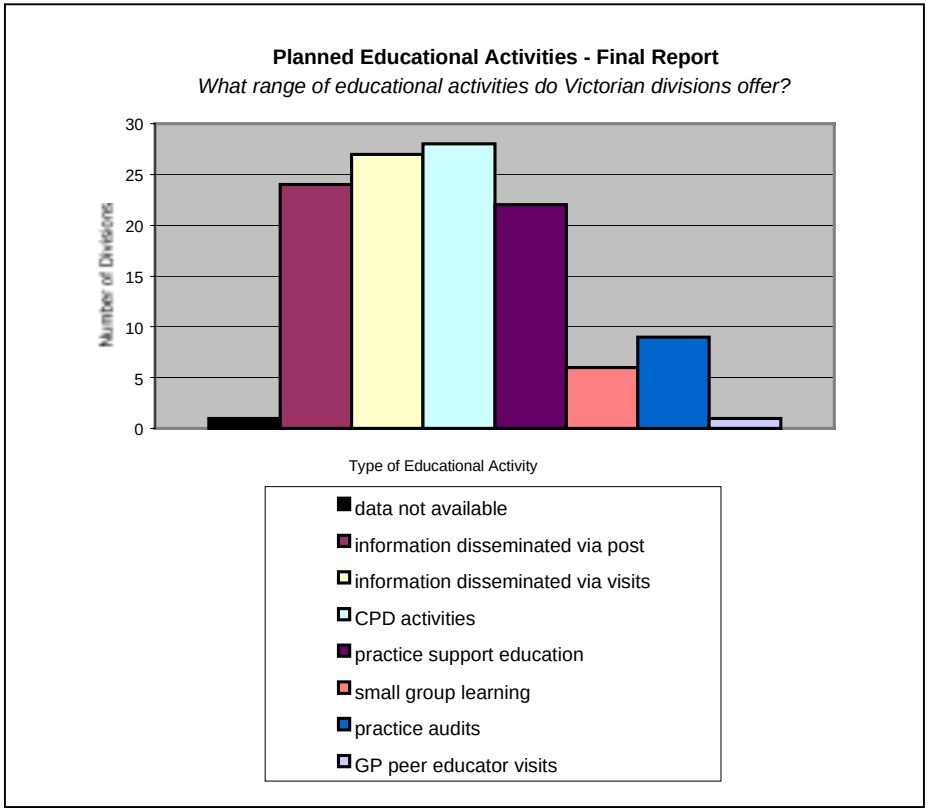




5.2 EDUCATION, TRAINING AND SUPPORT ACTIVITIES

GPDV investigated the range of education, training and support activities that divisions undertook in the CDM Program. This graph represents a continuum of educational activities ranging from information dissemination, practice level education, CPD activities to small group learning at the more sophisticated end. These graphs demonstrate that divisions achieved what they planned to do at the outset of the program. There appears to be nothing unexpected in this category. However there appears to be a slight increase in the number of divisions undertaking practice audits for CDM. Possibly this was because of the availability of an excellent cervical screening audit, which became available in the second half of last year.





5.3 PRACTICE INVOLVEMENT

We anticipated at the onset of the CDM program that divisions would focus on providing a strong practice support focus. This was because GPDV's evaluations of the Enhancing Primary Care (EPC) and General Practice Immunisation Initiative (GPII) programs said that this was required. Both highlighted the need for divisions to work with the whole of general practice on practice systems in order to implement structural change effectively for new initiatives. Therefore we identified levels of practice support that we anticipated divisions would undertake. These graphs demonstrate that divisions did what they planned to do. We do see however that there appears to be less of a role in resource distribution. We expect this because divisions' role is moving towards more of an 'in the practice' approach.