Quality improvement & the need for data.

West Vic Division of General Practice. August 2004.

The New Zealand Model

- Key take home messages:
  1. Quality improvement requires adopting a model

     “Plan Do Study Act”

     Divisions have a strong culture of “planning and doing” and we need to get better at “studying and acting” on findings for true quality improvement.

  2. Successful use of data for benchmarking for change management. GPs are naturally competitive & will change their clinical practice where there is evidence.

The dilemma

- OBF = measurement, traditionally this has been activity focussed.
- Divisions risk losing Government support unless we can prove outcomes
  - Population health
  - Access to primary health
  - Quality

The current situation

- ACIR is a great example of a measurable population health outcome.
- PIP & SIP can measure quality but superficial & slow.
- Population data costs
  - Postcodes without towns.
  - HIC data
- Cervical Screening data – confusing.
- Access data (SWPEs) – lack detail needed.
- Other examples….