phn
WESTERN SYDNEY
An Australian Government Initiative

Transforming Primary Care PART II

Quality Improvement & Change Management

WentWest: Progressing Health Now

Contents

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About WentWest, Western Sydney Primary Health Network

Since 2002, WentWest has been part of the western Sydney community, delivering support and education to primary care and general practice. WentWest works with key partners on shared health priority areas to improve equity and health outcomes for the region's diverse communities.

From July 1 2015, WentWest took on the role of Western Sydney Primary Health Network (WSPHN). Primary Health Networks are a Federal Government health initiative, established with the key objective of increasing the efficiency and effectiveness of health services for patients, particularly those at risk of poor health outcomes, and improving coordination of care to ensure patients receive the right care, in the right place, at the right time.

WentWest has structured its PHN role at three (3) levels all of which are actively supported by long term relationships with General Practice and Allied Health Leaders, the Western Sydney Local Health District (WSLHD) and Sydney Children's Hospitals Network (SCHN), consumers and community organisations,
and also national and international experts in primary care.

At the heart of this regional role is improving capacity and capability in primary care and general practice. This role has been articulated in our Strategic Plan 2016-2019 with a focus on supporting practices to deliver on the principles of the Patient Centred Medical Home.

WESTERN SYDNEY PRIMARY HEALTH NETWORK: HEALTH SYSTEM IMPROVEMENT OPPORTUNITIES

WHOLE-OF-SYSTEM (MACRO LEVEL)

Enhanced structural integration, system redesign and transformation across the various health services serving the population of western Sydney and covering both private and public health sectors.

CARE/POPULATION GROUPS (MESO LEVEL)

Enhanced service integration for targeted health initiatives including local and national priority focus areas and/or sub-populations that have been identified as a result of PHN planning population needs analysis.

PATIENT-CENTRIC AND COORDINATED CARE (MICRO LEVEL)

Improved delivery of patient-centric and integrated health services to individuals and their carers through a coordinated set of care interventions that ensure the right care is provided in the right place at the right time.

02

A Case for Change

When you're finished changing, you're finished.

Benjamin Franklin

Whilst primary care is often said to be efficient and effective, it is responsive to the care needs of a previous era and operates within a system that can no longer cater for the complex care needs of Australians. Change is critical to ensure WentWest can achieve its mission of working in partnership to lead better system integration and coordination, strengthening equity and empowerment for western Sydney communities and the people who care for them.

Today's health care needs are very different. Three quarters of Australians over the age of 65 have at least one chronic condition, putting them at risk of serious complications and premature death. Nearly a million Australians have been diagnosed with diabetes, however only a quarter get the care that is recommended each year.[1] Australians living in western Sydney experience lower socioeconomic status, higher burden of disease and reduced access to health care compared to other parts of Sydney. The burden of disease has shifted to chronic illnesses.[2]

The case for high performing primary care has never been stronger – as repeatedly articulated in international literature and practice. Australian primary care fails to adequately prevent and manage chronic disease (Grattan Report: Chronic Failure in Primary Care). The current model of Australian health care focuses on "the diagnosis and treatment of acute episodes of illness by medical practitioners".[3] The components of Australia's health care system "reflect the pattern of illness and medical knowledge of the time that they were established – 40 years ago".[4] Primary health organisations and general practices working in partnership have a significant role in evolving and transforming the way health care is delivered.

Quality Improvement extends beyond Continuous Process Improvement (CPI). It requires dedicated attention to change management. A recent McKinsey survey, highlighted that setting clear and high aspirations for change was the most significant tactic in organisational transformation. Findings of Annual ProSci Best Practices in Change Management surveys (1998-2016) consistently report that the number one greatest contributor to success was active and visible leadership.

Transforming health care will require sustained effort at all levels of the health system, but what is clear is that there is significant long term international evidence that the way in which primary care development takes place really does matter. WentWest positions itself as a leader; an interpreter, influencer and coach in bridging the gap between political strategy and practical implementation of health care change in the community.

[1] *Grattan*
[2] *Horvath, 2014*
[3] *Swerissen and Duckett, 2007*
[4] *Horvath, 2014*

03

Our Approach

It is not enough to do your best; you must know what to do, and then do your best.

Deming, 2000

WentWest's approach to quality improvement is deeply rooted in the science of improvement. According to Associates in Process Improvement, the science of Improvement "includes the interaction of systems thinking, understanding variation, psychology of change and the theory of knowledge that are applied to improve the performance of processes, products, services, organisations and communities."

WentWest draws upon knowledge from local and international experience, and is based upon the principles of thought leaders such as William Deming and Donald Berwick, and leading institutions such as the Institute for Healthcare Improvement (IHI) and Associates in Process Improvement (API).

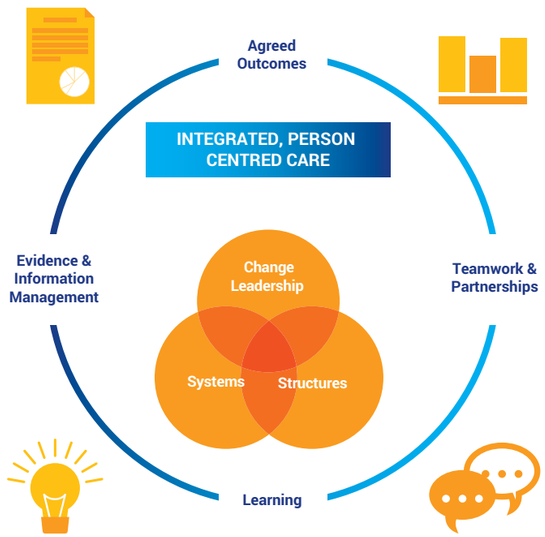
WentWest works at varying levels across the western Sydney general practice landscape and invests at numerous levels. This work has required a long term and ongoing investment by GPs, their practices, in partnership with WentWest. The intensity of effort required to transform care cannot be underestimated.

The organisation's Quality Improvement Framework as illustrated below, summarises WentWest's approach to quality improvement.

Change Leadership, Systems & Structures

Since its establishment in 2002, supporting and improving capacity and capability in primary care has been a central role for WentWest. The organisation's existing Strategic Plan (2016-2019) coupled with its priorities as the region's Primary Health Network (PHN) reflect this ongoing commitment.

Over time, WentWest has forged strong local, national and international relationships and established a reputation as a change leader. It has over two years of change management experience in the Patient Centred Medical Home space, and a Practice Quality Improvement Team with over 24 collective years of experience in supporting general practice.



Integrated, Person-Centred Care

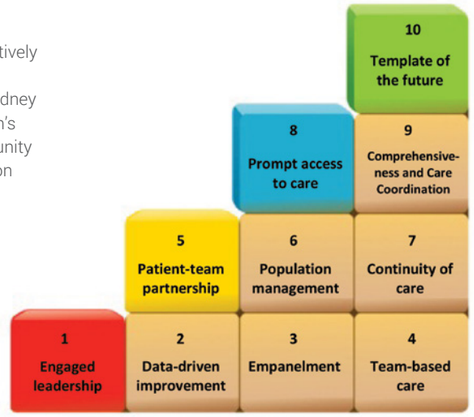
At the micro level, WentWest's quality improvement measures are focused on improved delivery of patient-centric and integrated health services to individuals and their carers through a coordinated set of care interventions that ensure the right care is provided in the right place, at the right time.

Agreed Outcomes

All WentWest improvement efforts include a clear, measurable aim and a measurement framework that supports the aim. As part of its Strategic Plan, WentWest has adopted the Quadruple Aim framework founded in the work by the Institute of Healthcare Improvement, Triple Aim, and complemented by Bodenheimer and Sinsky. This framework is being used to contextualise outcomes and aligns with the 10 Building Blocks of High Perfoming Primary Care, illustrated illustrated to the right.

Teamwork & Partnerships

WentWest's quality improvement measures are actively supported by long term relationships with General Practice and Allied Health Leaders, the Western Sydney Local Health District (WSLHD) and Sydney Children's Hospitals Network (SCHN), Consumer and Community Organisations, Partnership for Education, Evaluation and Research Western Sydney (PEER), and also national and international experts in primary care.



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Evidence & Information Management

WentWest has a highly skilled Data Governance Committee which provides oversight of the capture, use, storage, sharing, mining and security of information. It has also developed a common data dashboard for practices to ensure consistent data capture and use as part of quality improvement activities.

Learning

Learning is a key component of WentWest quality improvement initiatives.

WentWest recognises and embraces the development of subject matter and disciplinary knowledge (traditional improvement). WentWest has a 12 year history of education and training both as a former Regional Training Provider (RTP), Medicare Local and currently PHN, with an established events planning and executive function which runs in excess of 300 events each year. WentWest staff continually learn, by broadening their capabilities to understand complexity, clarify vision and improve shared mental models.[5]

WentWest achieves accelerated and continued improvement by instituting "knowledge for improvement".[6] WentWest aspires towards the four pillars of the System of Profound Knowledge.[7]

1. Understanding Variation – Detecting common and special cause, understanding why results differ
2. Appreciation of a System – "Ask, what am I part of?" [8]
3. A theory of knowledge – "Practicing PDSA everywhere, all the time" [9]
4. Psychology – "Begin with trust. In everyone you meet, see yourself" [10]

[5] *Senge, 1995*
[6] *Deming, 2000*
[7] *Deming, 2000*
[8] *Berwick, 2016*
[9] *Berwick, 2016*
[10] *Berwick, 2016*

Model for Improvement

WentWest utilises the Model for Improvement developed by Associates in Process Improvement to create, manage and institutionalise change. The Model for Improvement is based on Deming's work, and is a simple yet effective tool for bringing about positive change. It asks three simple questions to establish a clear and succinct "plan" and achieves accelerated change through the implementation of Planning, Do, Study, Act (PDSA) cycles.

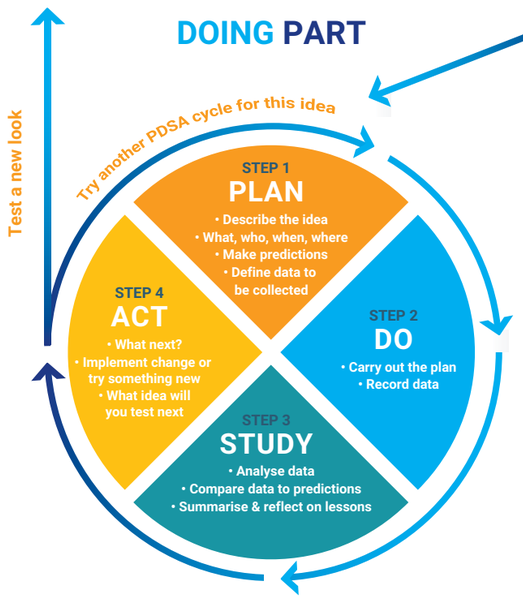
THINKING PART

Q1: WHAT ARE WE TRYING TO ACOMPLISH? — By answering this question you will develop your goal.

Q2: HOW WILL WE KNOW THAT A CHANGE IS AN IMPROVEMENT? — By answering this question you will develop measures for tracking your goal.

Q3: WHAT CHANGES CAN WE MAKE THAT WILL RESULT IN IMPROVEMENT? — By answering this question you will develop ideas for change.

DOING PART

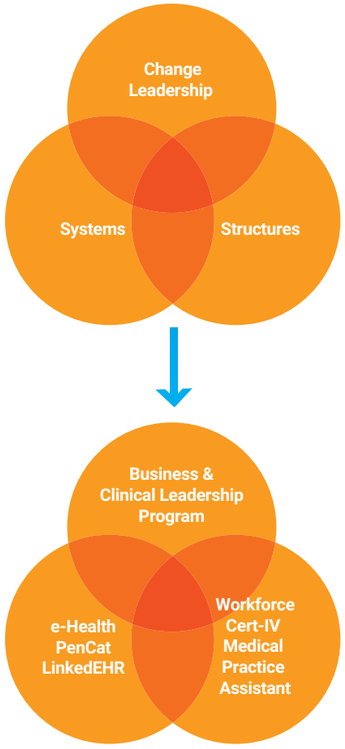


In a time of inevitable change in primary care, the demand on PHN support activities ever increases. Practices are recognising the need for change and are seeking out greater support from our team after moving away from traditional program implementation and striving for practice transformation.

Our **Practice Support & Quality Improvement Team**, consisting of both **clinical** and **non-clinical staff**, are highly skilled and trained in the **WSPHN Quality Improvement Framework & Change**.

The Practice Support Team. They are at the forefront, partnering with GP Principals, business owners and practice staff in **leading for change**.

Below are some examples of programs within the framework model.



WentWest's Practice Support & Quality Improvement Team tailor services and support based on the individual needs and readiness of the practice.

THE HOW?

	Transactional	Practice & Business Optimisation	Tranformation
Practice Focus	Ad-hoc requests	Focus and business and clinical operations around an improvement plan	Seeking to re-define the patient and consumer experience through application of the 10 Building Blocks of High Performing Primary Care
Practice Current Needs	Business as usual	Quality Improvement Focus Integrated Care Health Care Home	Quality Improvement Focus Integrated Care Health Care Home Patient Centred Medical Home
WSPHN Support Team	Helpdesk; Area Services; Coordination.	Helpdesk Practice Partnership Coordination Chronic Disease Support Nurse Care Facilitator	Helpdesk Chronic Disease Support Nurse Care Facilitator Business and Change Coach
Initiatives & Support Deployed	Accreditation; Practice Nurse Support; HealthPathways; E-Health Support MyHR; PenCAT	Practice Partnership Plans; Case Conferencing; Integrated Care; LinkedEHR; Financial Modelling; Workforce Development; Cert-IV Medical Practice Assisting	PCMH-A (Practice Assessment to determine readiness for PCMH); PCMH Leaders Groups; PDSA Cycles; Business & Clinical; Leadership Program

TRACKING OUR PERFORMANCE AND VALUE TO PRACTICES

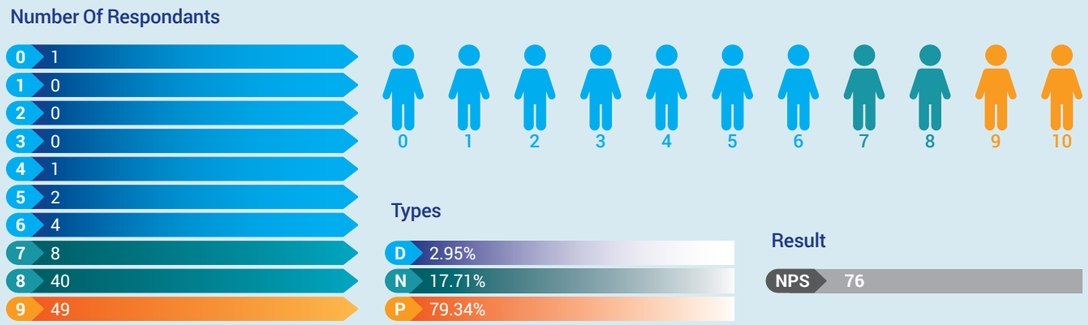
The 2016 GP Needs Survey results showed an overall satisfaction rating of 3.89 on a rating scale of 1 to 5. Further to that, practice support and quality improvement activities delivered by the team also rated highly.

Supporting through data extraction and practice performance comparisons	3.74
Helping you improve your practice systems	3.80
Linking you with other services	3.76

WentWest's goal is to deliver high quality support to our practices. We routinely evaluate our Practice Support activity and assess feedback to ensure we continue to deliver appropriate and quality service to local practices.

Below is a snapshot from a recent Practice Support Quality Improvement Survey, depicting the responses of 271 randomly selected practices that have been visited by a member of the Practice Support & Quality Improvement Team. When asked whether they would recommend the WentWest team's services based on their visit experiences, an overwhelming 79% would be inclined to do so. To make sense of such a result, the team uses the widely-used Net Promoter Score (NPS) index to measure practice satisfaction with the WentWest service offering.

Based on your experience from this visit, how likley would you be to recommend our Practce Support Team's services to other practices?



Dr Con Paleologos of Alpha Medical Centre, Seven Hills - one of several practices across western Sydney undertaking transformation with the assistance of the WentWest Practice Support & Quality Improvement team.

Support & Quality Improvement Programs

WentWest's Practice Support & Quality Improvement team offers a wide range of Clinical and Business Support Programs to aid practices in their change management journey. At the heart of this role is improving capacity and capability in primary care, articulated through our Strategic Plan 2016-2019.

CLINICAL SUPPORT	BUSINESS SUPPORT	PROGRAMS & OTHER ACTIVITIES
Primary Mental Health Services	Accreditation	eHealth
Child & Family Health	After Hours	NSW Health /WSLHD Integrated Care Demonstrator
Chronic Disease Management & Cycles of Care	Coordinated Veterans Care Program	HealthPathways
Cold Chain Management	Close the Gap	Western Sydney Diabetes Prevention & Management Initiative
Connecting Care	HealthPathways	LinkedEHR
Disease Specific Clinics	Human Resources Support	PEN Tools
Health Assessments	Information Management & Information Technology	Patient Centred Medical Home
Immunisation	LinkedEHR	Program Specific Resources
Infection Control, Sterilization & Spills	Medicare Benefits Schedule item numbers & billing	
Practice Nurse Resources, Education & Training	Practice & Service Incentive Payments	
Recalls & Reminders	Practice Management	
Women's Health	Privacy & Confidentiality	
Clinical Pharmacist in General Practice	Staff Training	
	Workforce	
	Business & Clinical Leadership Program	
	Cert-IV Medical Assisting Program	

04

Measuring Outcomes

What gets measured, gets managed.

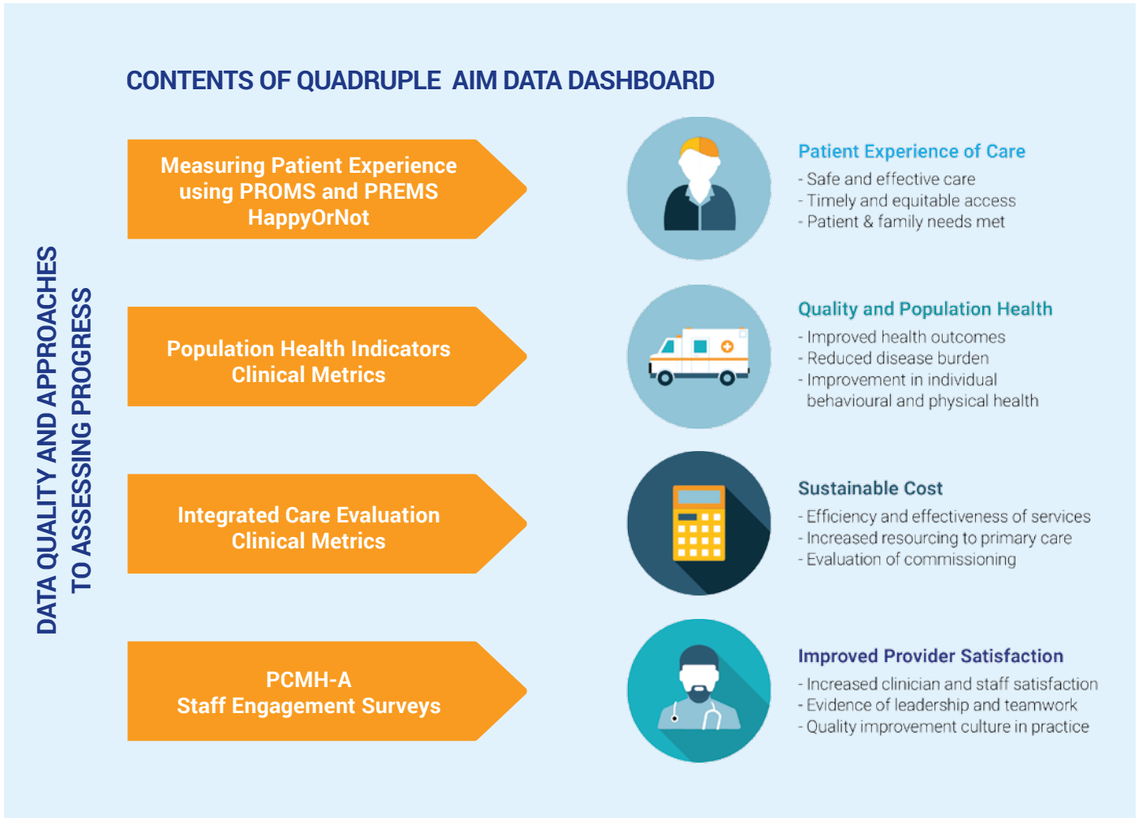
Deming, 2000

CURRENT CLIMATE

The leading voices on quality improvement acknowledge the importance of measuring what counts. It is also true that not everything that can be counted, matters, and not everything that matters can be counted.

In a resource-constrained social system, it is vital that we ensure our capital and capabilities are appropriately directed. Measurement is key to this understanding.

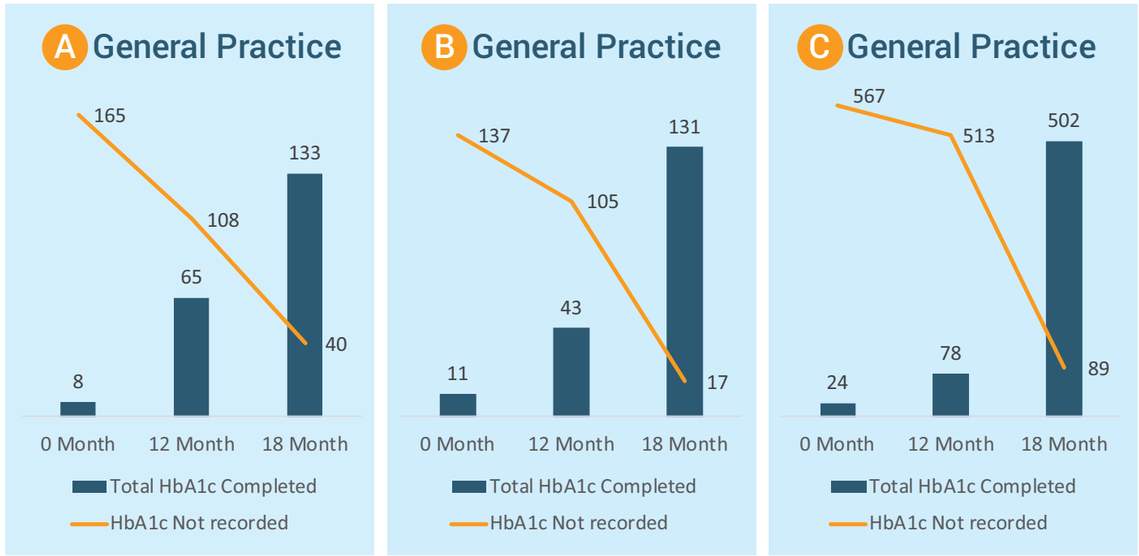
WentWest has adopted the Quadruple Aim framework to contextualise outcomes in a data dashboard. By aligning collected data to the Quadruple Aim, WentWest can ensure that practices are achieving improvements that matter across the entire health ecosystem, see below:



How will we know that change is an improvement?

Actual improvement can only be determined through measurement. WentWest data dashboard of clinical metrics provides an example of one avenue for recognising improvement by tracking changes in clinical data over time. Trends over time can be mapped across a timeline of events, and inferences drawn from data. Control charts can be utilised to monitor for common-cause and special-cause variation.

For example, the chart below shows data extracted from three practices before and after the implementation of Case Conferencing, an element of the Western Sydney Diabetes initiative. The results demonstrate an improvement in the recording of HbA1c in all three practices. We can infer from these results that case conferencing had a positive impact on the measurement and recording of HbA1c measurement across all practices. The initiative relies on a strong relationship between WentWest and WSLHD, and highlights the synergistic impact of this partnership.



What changes can we make that will result in improvement?

Peter Drucker broadly stated that "what's measured, improves." He clarified this to state that whilst this is not always technically correct, simply the act of measuring data can set off a cascade of events that may ultimately result in improvement. Sustained improvement occurs only when a change is implemented, however not all change results in an improvement. Measuring data allows us to effectively determine whether a change has had a positive impact, either providing an argument for reinforcing a change, or abandoning it.

Improving Scale and Effectiveness of Measurement

DATA LINKAGE PROJECT

Together with NSW Health and Western Sydney Local Health District (WSLHD), WentWest is conducting a pilot study, exploring the utility of general practice data for linkage to multiple NSW Health-related datasets. The intent is to enhance information from general practices, and inform NSW Health policy and planning, and aims to:

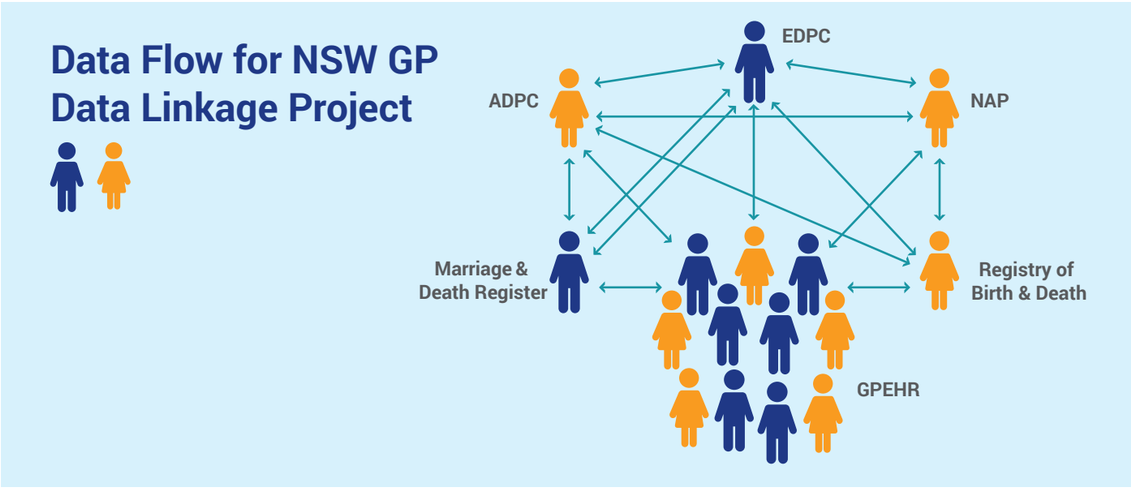
- Provide information about health care use and mortality among general practice patients; and
- Investigate the patterns of acute health service use in relation to patient characteristics and other health service utilisation to inform health system planning.

The first aim relates to adding value to general practice data in order to inform policy and planning in that setting. The second is primarily to support the NSW Integrated Care Strategy, by developing a model that can predict patients' level of future health service use. This can assist in the appropriate selection of patients for receiving integrated care.

ORGANISATIONAL PERSPECTIVE

A key role of data measurement is to help local general practices meet their functions by:

- Creating critical mass in the areas of data analysis, information and knowledge management; and
- Facilitating integration of service delivery through provision of integrated data and information.



HEALTH INTELLIGENCE UNIT

WentWest's emerging, innovative Health Intelligence Unit (HIU) will build capacity and capability in general practice by providing practices with the tools to develop, capture and use knowledge to support improved patient outcomes through informed decision making.

The HIU will incorporate data from population health, activity, performance and other measures from a local and regional level. It will assist key decision makers within general practices to better understand population and patient care needs and make effective, informed decisions about health care delivery. It will also provide advice and support on interpretation and use of data and information.

05

Summary

The effectiveness of primary care is well documented in literature, but how can individual practices show that their care is making a difference? How do they demonstrate that they are doing things 'better'?

Accelerated quality improvement calls upon a coordinated and sustained approach to change management across all levels of the healthcare sector. William Edwards Deming states that "It is not necessary to change. Survival is not mandatory". He uses irony to demonstrate the critical importance of change for general practice to survive. WentWest has positioned itself well as a change leader, with critical success at the forefront of primary care.

WentWest quality improvement and change management initiatives are firmly aligned with its Strategic Plan for 2016-2019. We have a strong sense of where primary care is now and where it could go, driving a continuum of activity through needs analysis, strategic planning, resourcing, implementation, coaching and measuring quality outcomes. WentWest QI measures are underpinned by its objective to provide coordinated, patient centred care in western Sydney.

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We acknowledge Aboriginal people as the traditional owners of the land. We also pay respect to our Aboriginal Elders past and present, and extend that respect to include Aboriginal people for today.