



Train IT Medical
Competence with Confidence

Implementing Quality Improvements

- PIP QI -

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Learning Objectives:

1. Understand changes to the Practice Incentives Program
2. Explain the new PIP QI.
3. Identify specific practice quality improvement activities.
4. Design an improvement plan to meet eligibility for PIPQI & create an improvement culture.
5. Develop further understanding of relevant data systems.

Learning Objective 1:

Explain the Practice Incentive Program: Quality Improvement (PIP QI)




- Participate in continuous quality improvement activities in partnership with your PHN.
- Submit a de-identified data set of **10 measures.**



Practice Incentive Payments

1. PIPQI – *from 1 August 2019*
2. eHealth Incentive
3. After Hours Incentive
4. Rural Loading Incentive
5. Teaching Payment
6. Indigenous Health Incentive
7. Procedural General Practitioner Payment
8. General Practitioner Aged Care Access Incentive



“The PIP QI Incentive will give practices increased flexibility to improve their detection and management of a range of chronic conditions & to focus on issues specific to their practice population”

Learning Objective 2:

Explain the new Practice Incentive Payment Quality Improvement (PIP QI)

Continuing
Improvements

Quality care

Enhancing
capacity

Improving
access and
health outcomes
for patients



PIP QI from 1 August 2019

- First quarter payments (covering 1 August to 30 October) made 1 November.
- General practices complete an **annual confirmation statement** each year declaring compliance.
- **Must maintain evidence of compliance for 6 years (not PHN responsibility)**
- Dept Health conducts audits & compliance checks of payments made under the Practice Incentives Program

Katrina's tip: Document every improvement activity you do & celebrate each achievement

PIPQI Preparation Checklist

DO NOW

- Practice accreditation
- Review data sharing agreement with your PHN
- Set up PRODA to apply online for PIPQI (from 1 August 2019)

DO NEXT


- Install & learn Pen CS or Polar (data extraction tools)
- Review the Improvement Measures
- Start Implementing Quality Improvement Activities



DO NOW

- Practice accreditation
- Review data sharing agreement with your PHN
- Set up PRODA to apply online for PIPQI (from 1 August 2019)

PRODA? Provider Digital Access


 **medicare**

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What is PRODA?

PRODA is an online authentication system used to securely access certain online services including HPOS and the NDIS.

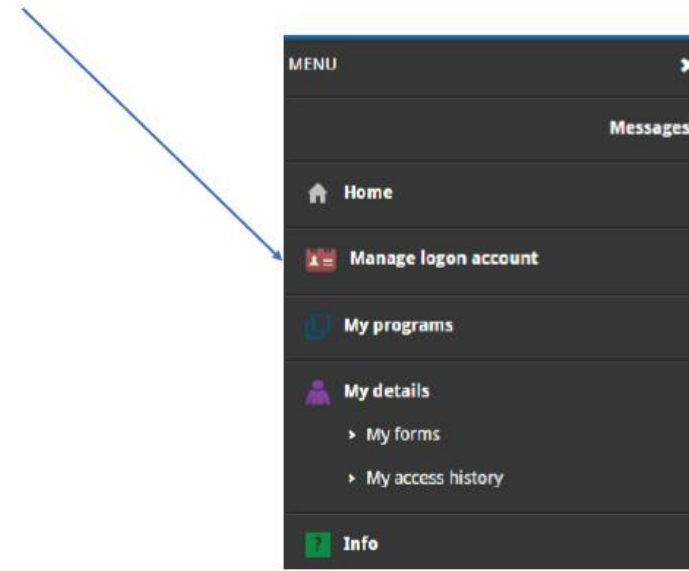
Designed as a two-step verification process, it requires a username, password and verification code to login. It is a portable solution that requires no additional hardware or software and is available to those who need access to these services.



Used to securely access government online services

Access to PIP via PRODA


You may have previously provided your Individual HPOS PKI RA number to the PIP team to permit you to update the Practice PIP details. As you have a separate PRODA RA number, you will need to ensure this number is linked to PIP. To find your PRODA RA number, you will need to CLICK on **Manage logon account**



You will be taken to the following screen: Hover over the MENU button until you see the following icons:

Click on My Login Details:





DO NEXT

- Install & learn Pen CS or Polar (data extraction tools)
- Review the Improvement Measures
- Start Implementing Quality Improvement Activities



PIP QI – Eligible data set - Improvement measures

1. Proportion of patients with **smoking** status recorded
2. Proportion of patients with **alcohol** status recorded
3. Proportion of patients with **weight** classification recorded
4. Proportion of patients with up-to-date **cervical screening**.
5. Proportion of patients with **diabetes with blood pressure recorded**
6. Proportion of patients with **diabetes with current HbA1c result**
7. Proportion of patients with **diabetes immunised against influenza**
8. Proportion of patients **COPD & immunised against influenza**
9. Proportion of patients **over 65 immunised against influenza**
10. Proportion of patients with **necessary risk factors to enable CVD assessment**




QUESTION:

What are the prescribed targets?

ANSWER:

There are no prescribed targets associated with any of the Improvement Measures.



Practices may focus their quality improvement activities on areas which are informed by their clinical information system data and meets the needs of their practice population.



QUESTION:

Do you have to focus your quality improvement activities on the 10 Improvement Measures?

ANSWER:

No.

Focus on areas which are informed by your clinical information system data and meet the needs of your practice population.

Learning Objective 3:

Identify specific practice improvement activities





Improving health record quality in general practice

How to create and maintain health records that are fit for purpose

[Access RACGP resource](#)

Data Quality Checklist for all 'active' patients

- 1 Demographics – are the contact details up-to-date?**
 - Double-click on the patient's telephone number to check and update details
- 2 Medication List – is the Current Meds list accurate?**
 - Right click to delete/cease medications no longer relevant (they can then be found in the Old/Past Scripts thereafter)
 - If none, tick No medications
- 3 Past History List – does it contain only significant conditions that a hospital or specialist would need to know?**
 - Right click to edit, delete or add new
 - If none, tick No significant past history (PMH) box
- 4 Allergies – have you also recorded adverse reactions?**
 - Double-click in allergies box and Add, Edit, Delete
 - If none, tick No Known Allergies/Adverse Reactions/Nil Known
- 5 Immunisations – have immunisations been recorded?**



[Download the 'Data Quality' Checklist](#)

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Connect with us – we'd love to hear from you.
With best wishes, Katrina Otto

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