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| Practice Name  |  | Cycle number |  |
| Staff initiator:  |  | Position title: |  |
| Start date: |  | End date: |  |
| Purpose | What are we trying to accomplish?What do you plan to do? |
| Ensure that the patient records are coded correctly for the continuity of care for our patients also enabling us to correctly run reports on our patient population for future QI activities. |
| How will we know that change is an improvement? What do you hope to achieve? (include measurement/outcome) |
| We will measure: (before and after figures)1. How many patients are indicated to have a chronic condition (CKD, Diabetes, Mental Health, COPD and Osteoporosis reporting available) without a coded diagnosis in Cleansing CAT4.
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| What change can we make that will result in improvement? |
| 1. Implement a coding policy for the practice and update policy and procedures manual for accreditation.
2. Clean-up database by clinical team reviewing lists of patients with indicated chronic disease with no coded diagnosis.
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| PLAN | By answering this, you will develop the GOAL for improvement. The goal must be SMART - Specific, Measurable, Achievable, Relevant, Time-limited |
| Write a concise statement of what you plan to do, and the steps involved | From the questions/answers above, write your statement or aim of what you are attempting to achieve. |
| Ensure our practice has consistent coding for the continuity of care of our patients. We also will have a policy in place to ensure that we comply with the eHealth PIP Requirements. |
| How are you going to do this? (list the steps to be implemented) |
| Steps | By whom | By when |
| Establish QI team for this activity |  |  |
| Draft a copy of a coding policy for review by GPs and present at clinical meeting for feedback/agreement. |  |  |
| Update policy and procedures manual. |  |  |
| Use CAT4 and identify patients indicated to have a chronic condition (CKD, Diabetes, Mental Health, COPD and Osteoporosis reporting available) without a coded diagnosis in Cleansing CAT4 |  |  |
| Sort by provider and diagnosis for common terms free texted and provider most likely to free text |  |  |
| Consult with provider and develop plan for coding relevant patients or recalling identified at risk patients. |  |  |
| Utilise Topbar to opportunistically correct coding issues upon patient presentation. Potential to set prompt to utilise GoShare for health literacy for patient cohorts. |  |  |
| Implement business rules on diagnosis entry and use free text mapping tools for clinical software to avoid issues in the future. |  |  |
| At completion of QI period, measure change by repeating reports using Pen/clinical software. Recipes and assistance provided by PHN. Compare to baseline. |  |  |
| DO | At completion of QI period, measure change by repeating reports using Pen/clinical software. Recipes and assistance provided by PHN. Compare to baseline. |
| **Implement your plan and write down observations you have during your implementation.**  | What did you observe? |
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| Where there any unexpected events? |
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| STUDY | You will ask, “Do I have to modify the plan” |
| **After implementation you will study the results and record how well it worked, if you met your goal and document areas of improvement.**  | What did you learn? |
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| Has there been an improvement? |
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| Did you meet your measurement goal? |
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| What could be done differently? |
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| ACT | If it did not work, what you can do differently in your next cycle to address that. If it did work, are you ready to spread it across your entire practice? |
| **Here you will write what you came away with for this implementation, whether it worked or not.**  | What did you conclude from this cycle? |
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