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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? |
| Increase recording of patients with intellectual disabilities in practice clinical information system.Identify needs and gaps for managing health needs for patients with intellectual disability  |
| How will we know that change is an improvement? What do you hope to achieve? (Include measurement/outcome) |
| There will be greater understanding of what patients with an intellectual disability need Providing consistent recalling system with additional adjustments that may be required  |
| What change can we make that will result in improvement? |
| Encourage training for all staff and Doctors on what a patient with an intellectual Disability may require Record an alert in file in Clinical Information System & appointment system, for reception and for clinical staff, identifying patient needs and additional adjustments required. Display of educational posters in waiting room (easy read information) and handouts (print and soft copy) sourced from SPIDAH program during consultation. |
| 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. |
| Increase identification of active patients that have an intellectual disability in practice clinical information systemProvide wrap around care, which is tailored to individual with intellectual disability and corresponds to the disability act  |
| How are you going to do this? (List the steps to be implemented) |
| Steps | By whom | By when |
| Consult with the PHN practice facilitator, develop a plan of action and present it at staff meetings. |  |  |
| Form a QI team, discuss workflow and allocate roles & responsibilities. [ideally – practice manager (can include PHN practice facilitator) and at least one GP, nurse, and admin staff.] |  |  |
| Provide training to all staff on intellectual disability and additional adjustments.  |  |  |
| Display educational posters in waiting room (easy read information) |  |  |
| Use prompts for patients in clinical software and in the appointment software to personalise patient needs Eg) Patient needs a quiet room to wait, patient needs a double appointment, call the patient to remind the patient of the appointment, do not SMS  |  |  |
| Recall patients for GP management plan or review in a personal way for patient  |  |  |
| At completion of QI period, measure change by noting increased recording of patient with an intellectual disability. Inform staff of QI successes and learnings.  |  |  |
| DO | This may include how the patients react, how the doctors react, how the nurses react, how it fits in with your system or flow of the patient visit. You will ask, “Did everything go as planned?” |
| **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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