**Quality Improvement Activity**

**Start date: End date:**

Increase the Number of 715 Health Assessments

**Practice/team name:**

**Specific**

Provide a clear description of what needs to be achieved.

**Measurable**

Include a metric with a target that indicates success.

**Achievable**

Set a challenging target but keep it realistic.

**Relevant**

Keep your goal consistent with higher-level goals.

**Time-Bound**

Set a date for when your goal needs to be achieved.

**QI Activity Lead:**

Help to ensure that Aboriginal and Torres Strait Islander people receive primary health care matched to their needs, by encouraging early detection, diagnosis and intervention for common and treatable conditions that cause morbidity and early mortality through the uptake of the Aboriginal and Torres Strait Islander Health Check (MBS item 715) as an annual service for all ages.

**Goal:**

What are we trying to accomplish?

**Change Ideas:**

What change can we make that will result in an improvement?

Assure practice is a culturally safe and welcoming environment (can be a separate QI activity)

Provide training to ensure all staff feel comfortable and competent to ask patients for their cultural background. (Can be a separate QI activity)

Provide training to clinicians to develop and maintain the skills to complete a 715 Health Assessment.

**QI Activity Team:**

Increase in the number of identified Indigenous patients with an up to date 715 health assessments (once in 9 months) by 10% in next 3 months.

**Benchmark:**

What is our current data saying?

* Name/Role
* Name/Role
* Name/Role
* Name/Role
* Name/Role

Our patients feel comfortable to identify as Aboriginal and/or Torres Strait Islanders and are interested to take up the offer to have an 715 Health Assessment on an annual basis.

Over the next 12 month 50% of our patients who identify as Aboriginal and/or Torres Straight Islander have a health assessment once per year.

**Measures:**

How will we know that a change is an improvement?

What data will we use to track our improvement?

**ACT**

*Review or extend activity?*

*Implement the plan and record observations*

**DO**

**PLAN**

**STUDY**

*Develop a plan and the steps involved*

Consult with the WVPHN 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 WVPHN practice facilitator) and at least one GP, nurse and admin staff.]

QI lead to extract baseline data from practice software using data extraction tool.

Ensure the Aboriginal and Torres Strait Islander status is recorded in Clinical Software. Asking the question at every appointment

Use data extraction tool to extract a list of patients who have self-identified as Aboriginal and / or Torres Strait Islander in origin and have not had 715 health assessments in the last 9 months.

*Analyse and learn from the results*

**ACT**

*Review or extend activity?*

*Implement the plan and record observations*

**DO**

**PLAN**

**STUDY**

*Develop a plan and the steps involved*

Consult with GP’s and set up appointments for 715 health assessments and chronic disease follow-ups for eligible patients. Implement a reminder system and support its use, including Walrus/ TopBar Screening prompts.

Send invitation letters to eligible patients including brochure.

Provide training to ensure all clinicians have the skills to complete a 715 Health Assessment.

Ensure recall visits are scheduled for follow-up appointments as required after health assessments.

Use clinical assessment tools to track progress on health assessments.

Develop a progress chart for the activity and display updates in the tea-room.

At completion of QI period, measure change.

*Analyse and learn from the results*