Train IT Medical

Leading Your Practice Into The Digital Future

Leading Your Practice in a Digital Era

Practice Managers Conference

Launceston Thursday 19 April 2018

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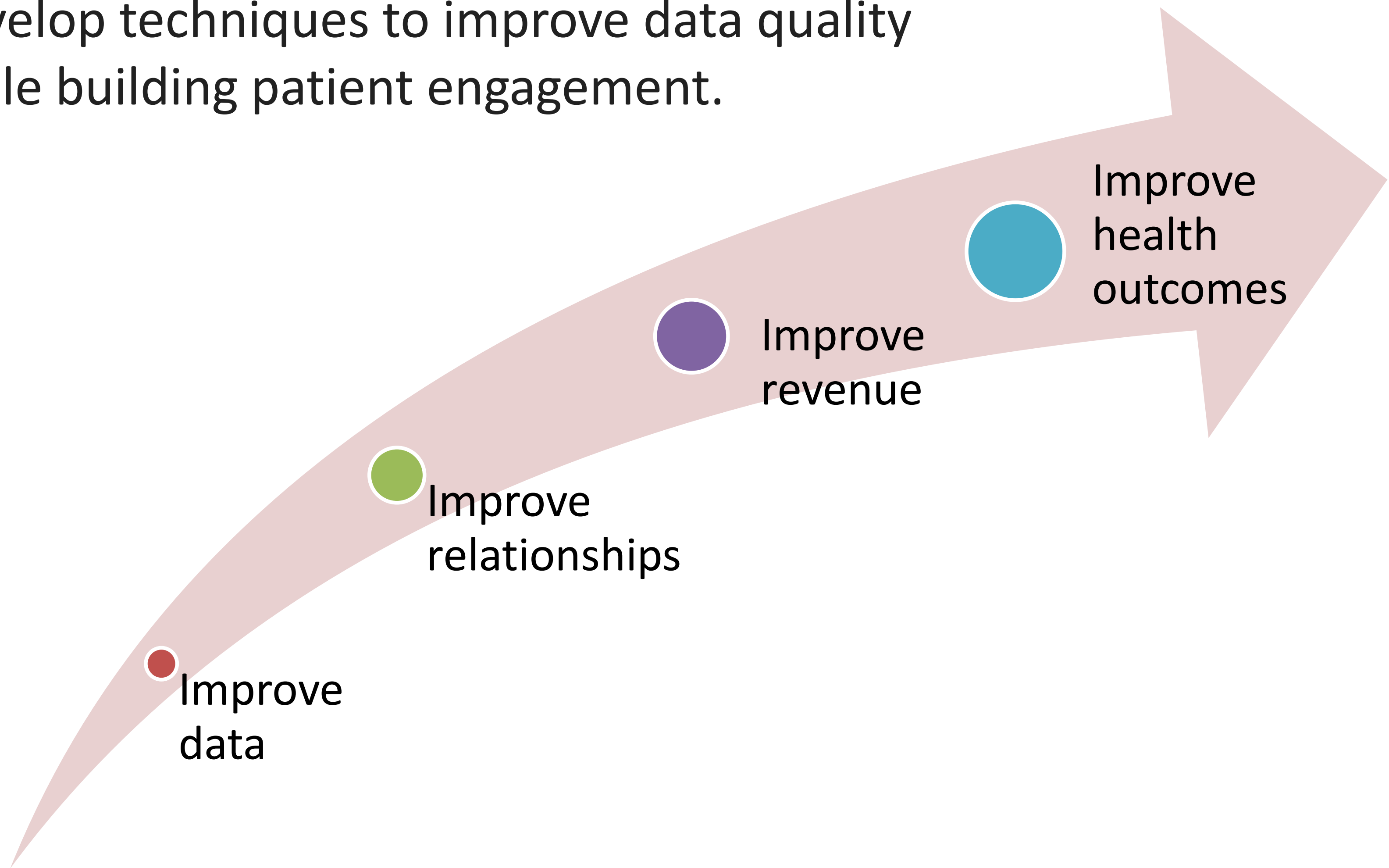
Presentation 1

Our Learning Objectives:

Develop techniques to improve data quality while building patient engagement.



Do you have a ‘patient-centric’ or ‘practice-centric’ business?

Does technology & patient engagement go together?

- ✓ SMS Reminders
- ✓ Track health improvements
- ✓ Education
- ✓ Appointments
- ✓ Self-check-in
- ✓ Results

Use change as a way of engaging with your patients

www.myhealthrecord.gov.au

2018

A My Health Record for every Australian in 2018

The Australian Government announced in the 2017 Budget the creation of a My Health Record for every Australian to begin nationally from mid 2018.

If you don't already have a My Health Record, a new record will be automatically created for you, unless you choose not to have one.

Can't wait for 2018 and want a My Health Record now? Register here

Would you like more information? We can email* you about the My Health Record system, the automatic record creation process occurring in 2018 and details about what you need to do, and by when, if you do not want a record automatically created for you. Please enter your email address below:

* Your email address:

Submit

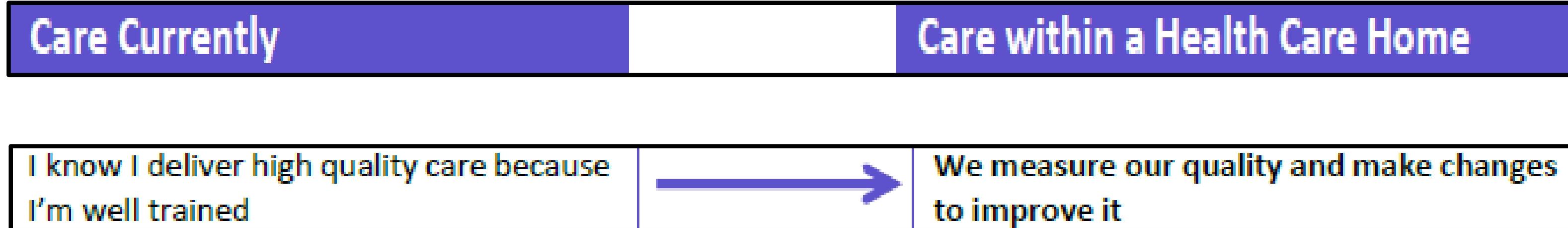
* What do we do with this information?

My Health Record Expansion Program

Care Currently	Care within a Health Care Home
My patients are those that make appointments to see me	Our patients are those who are registered in **our Health Care Home**
Patients' chief complaints or reasons for visit determines care	**We systematically assess** all our patients' health needs to plan care
Care is determined by today's problem and time available today	Care is determined by a **proactive plan to meet health needs, with or without visits**
Care varies dependent on memory and scheduled time of doctor	Health care providers have access to **evidence-based guidelines** to build the right care plan
Patients are responsible for coordinating their own care	**A prepared team** of professionals supports the coordination of a patients' care
Patients are passive recipients of care	Patients play an **active role** in making decisions about their care and are **empowered** to better manage their conditions
I know I deliver high quality care because I'm well trained	**We measure our quality and make changes to improve it**
It's up to the patient to tell us what happened to them	**We track tests and consultations, and follow-up** after visits to other services (e.g. ED visits or specialist appointments)
Clinic operations centre on meeting the doctors need	An **interdisciplinary** team works at the **top of their professional capacity** to serve patients

RACGP Standards for Patient Centred Medical Homes

Health Care Homes



RACGP Standards for Patient Centred Medical Homes

Use change as a way of leading improvements

You won't pass accreditation without good data & systems

You won't receive Practice Incentive Payments without evidence of improvements

Using data to identify at-risk patients eg kidney disease

Data Cleansing

Missing Demographics | Missing Clinical/Accreditation Items | Indicated CKD with no diagnosis | Indicated Diabetes with no diagnosis | Indicated Mental Health with no diagnosis | Indicated COPD with no diagnosis | Medication Review

Indicated | Reviewed

Patient List page 1 of 8 [count = 150]

Save & Remove | Export

Double-click a patient to open it in your clinical system (MD,BP,Zedmed) Page No. 1 Go

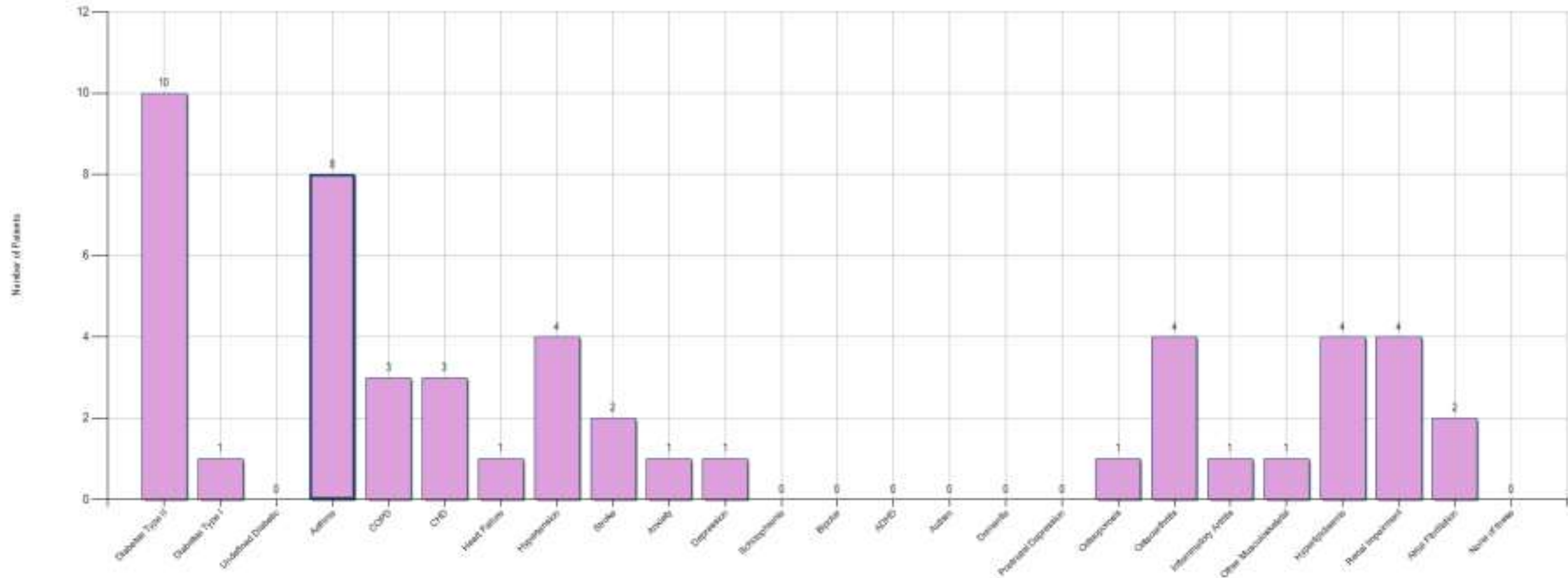
Prev Page | Next Page

Clinical Action Plan: 1-3mths 3-6mths 12mths

Note: CKD Stage is calculated using the most recent eGFR and ACR.

Surname	Firstname	DOB	Indication Date	Sex	eGFR	ACR	CKD	BSL	FBG	Smoking	Diabetes (Dx or HbA1c>=6.5, BSL>11.1 or FBG>7)	Hypertension (Dx or BP>140/90)	Obesity (BMI>30)	CVD Dx	Indigenous and Age>30	Assigned Provider	Confirm Condition Does Not Exist
Surname	Firstname_103	24/01/1965	28/07/2015	M	90.0	3.2	Stage 1	4.6		Smoker	Y	Y				Surname_16	☐
Surname	Firstname_1036	24/01/1941	19/10/2016	M	59.0	1.4	Stage 3a	5.3		Ex smoker		Y		Y		Surname_3	☐
Surname	Firstname_1054	24/01/1935	23/02/2016	F	58.0	2.2	Stage 3a	6.0			Y	Y		Y		Surname_20	☐
Surname	Firstname_1075	24/01/1946	30/11/2016	M	89.0	2.7	Stage 2	7.1		Never smoked	Y	Y	Y			Surname_2	☐
Surname	Firstname_108	24/01/1927	18/01/2017	F	45.0	23.4	Stage 3a	11.8	5.7	Never smoked	Y	Y				Surname_20	☐
Surname	Firstname_1102	24/01/1936	21/09/2016	M	55.0	2.0	Stage 3a	7.0	7.0	Ex smoker	Y					Surname_2	☐
Surname	Firstname_111	24/01/1944	11/01/2017	M	47.0	0.5	Stage 3a	5.6	5.6	Ex smoker		Y	Y			Surname_7	☐
Surname	Firstname_1112	24/01/1957	12/10/2016	F	57.0	0.8	Stage 3a	5.2	5.9	Ex smoker		Y				Surname_2	☐
Surname	Firstname_1147	24/01/1967	07/12/2016	M	66.0	7.4	Stage 2		5.7	Smoker	Y					Surname_3	☐
Surname	Firstname_1156	24/01/1953	27/10/2016	M	57.0	0.4	Stage 3a	5.9		Never smoked						Surname_7	☐
Surname	Firstname_1224	24/01/1992	02/05/2016	M	90.0	30.8	Stage 1	14.0			Y	Y	Y			Surname_7	☐
Surname	Firstname_127	24/01/1954	19/01/2017	M	59.0	0.6	Stage 3a	6.4	5.2	Never smoked	Y			Y		Surname_0	☐
Surname	Firstname_131	24/01/1979	07/11/2016	M	90.0	1055.8	Stage 1	7.0	4.9	Smoker	Y	Y				Surname_3	☐
Surname	Firstname_1333	24/01/1961	10/07/2015	M	90.0	4.2	Stage 1	9.1	12.0	Never smoked	Y	Y				Surname_3	☐
Surname	Firstname_1444	24/01/1947	15/04/2016	M	60.3	117.6	Stage 2	5.3	6.2	Never smoked		Y				Surname_16	☐
Surname	Firstname_1483	24/01/1929	03/08/2016	F	52.0	1.2	Stage 3a		5.1	Never smoked						Surname_2	☐
Surname	Firstname_1526	24/01/1957	28/07/2016	M	88.0	5.3	Stage 2	6.4	5.7	Smoker	Y	Y	Y	Y		Surname_14	☐
Surname	Firstname_1541	24/01/1945	25/05/2016	F	45.0	1.5	Stage 3a	6.0		Ex smoker	Y	Y				Surname_0	☐
Surname	Firstname_1549	24/01/1951	04/10/2016	M	80.0	3.2	Stage 2	9.1	10.3	Ex smoker	Y	Y		Y		Surname_2	☐
Surname	Firstname_1563	24/01/1952	21/01/2017	M	54.0	8.1	Stage 3a	6.5		Never smoked	Y	Y	Y			Surname_20	☐

Do you know your common comorbidities?



Income Estimator

Condition	MBS Item #	Description	Item price	Total Active Patients	Predicted occassions of service	Potential income
Patients >= 5 meds	900	Domicilliary Medication Management Reviews	$154.80	446	446	$69,040.80
Mental Health	2717	Assessment and development of GPMHTP	$134.10	433	228	$30,574.80
	2712	Review of GPMHTP	$71.10		290	$20,619.00
Diabetes	721	Preparation of GPMP	$144.25	74	9	$1,298.25
	723	Coordination of TCA	$114.30		9	$1,028.70
	732	Review of GPMP	$72.05		62	$4,467.10
	732	Coordinate review of TCA	$72.05		62	$4,467.10
CHD	721	Preparation of GPMP	$144.25	112	13	$1,875.25
	723	Coordination of TCA	$114.30		13	$1,485.90
	732	Review of GPMP	$72.05		102	$7,349.10
	732	Coordinate review of TCA	$72.05		102	$7,349.10
COPD	721	Preparation of GPMP	$144.25	53	18	$2,596.50
	723	Coordination of TCA	$114.30		20	$2,286.00
	732	Review of GPMP	$72.05		47	$3,386.35
	732	Coordinate review of TCA	$72.05		47	$3,386.35
Asthma	721	Preparation of GPMP	$144.25	269	231	$33,321.75
	723	Coordination of TCA	$114.30		231	$26,403.30
	732	Review of GPMP	$72.05		263	$18,949.15
	732	Coordinate review of TCA	$72.05		263	$18,949.15
Health Checks	705	Health check taking ≥45 mins, ≤60 mins (75+ age)	$190.30	210	188	$35,776.40
	705	Health check taking ≥45 mins, ≤60 mins (45-49YO)	$190.30	186	175	$33,302.50
	705	Health check (≥45 mins, ≤60 mins) (HKids Check 4YO)	$190.30	64	28	$5,328.40
ATSI	715	Aboriginal / TSI health check	$212.25	7	1	$212.25
	10987	Follow up to 715 by nurse or Aboriginal health worker	$24.00	7	1	$24.00

Total potential income **$264,436.40**

Set your own practice KPIs & track performance

Aim: 80 per month

715's

100
80
60
40
20
0

Jun-15 Jul-15 Aug-15 Sep-15 Oct-15 Nov-15 Dec-15 Jan-16 Feb-16 Mar-16 Apr-16 May-16 Jun-16 Jul-16 Aug-16 Sep-16 Oct-16 Nov-16 Dec-16 Jan-17 Feb-17

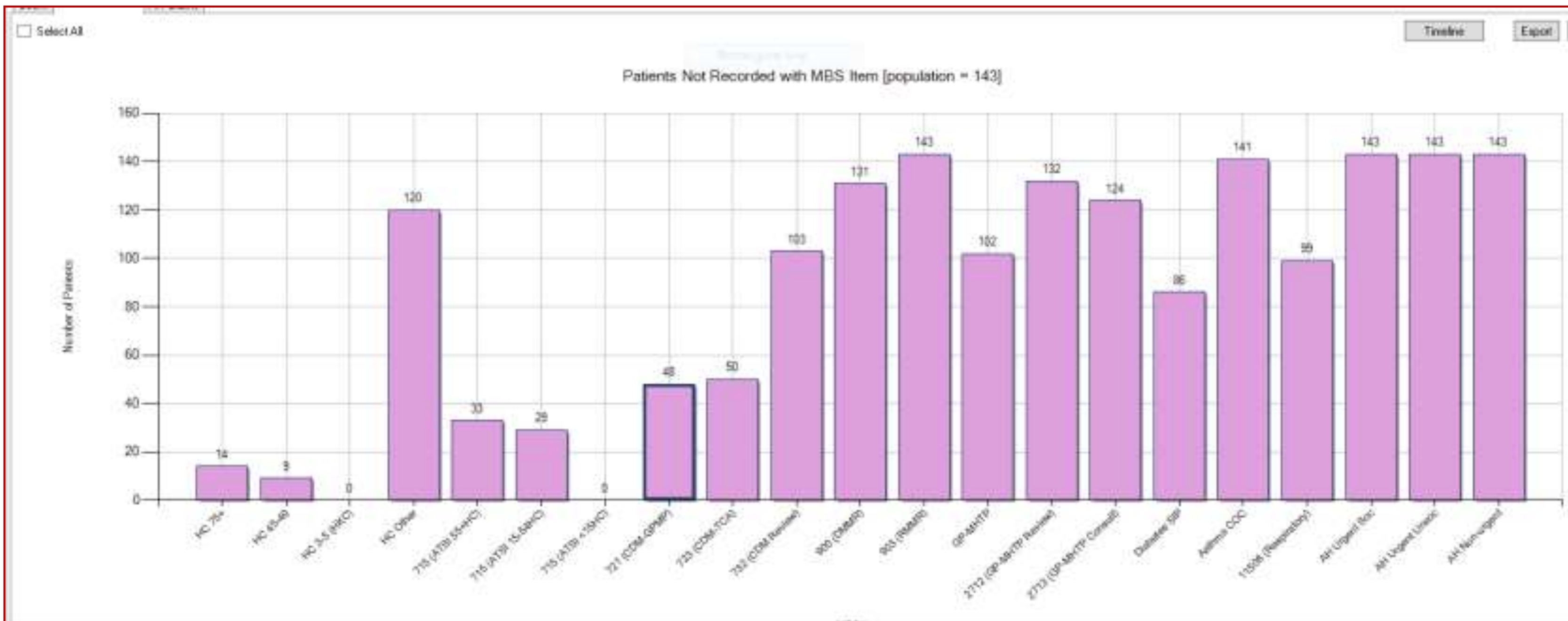
Tips:

- Encourage a team effort to achieve the goals by setting a target on the graph & place graph in the staff room/noticeboard to encourage a proactive approach.
- Reward/celebrate achievements.

	Whole Practice	GP 1	GP 2	GP 3	GP 4	GP 5	GP 6	GP 7	GP 8	GP 9
1. Allergy Recorded										
Total population	13697	2488	1996	921	1718	1839	936	604	686	43
Nothing recorded	28.8%	16.4	36.5	28.1	51.2	9.4	21.5	24.3	4.1	30.2
Active population	9576	1866	1628	684	1192	1445	795	397	514	30
Nothing recorded	17.7	29.5	28.5	19.7	39.9	4.2	13.8	14.9	01.0	10.0
2. Gender not recorded										
Total population	141	28	11	13	21	6	12	5	6	0
Active population	35	5	2	3	11	2	7	0	3	0
3. Smoking – nothing recorded										
Active population over 16 (Active (3x > 2 years)	27%	15.7	63.9	60.4	76.4	11.5	44.6	41.0	21.2	39.7
4. Recording of ATSI patients										
Total population	0	0	0	1	0	0	0	0	0	0
Active population (Active (3x > 2 years)	1	0	0	1	0	0	0	0	0	0
5. Diabetes Prevalence										
Total population	3.5%	2.9	2.8	1.4	8.8	5.1	2.5	1.2	4.2	4.7
Active population (Active (3x > 2 years)	4.6%	3.8	3.2	1.9	11.7	6.2	2.9	1.8	5.5	6.7
Diabetics 65+, 8+ medications	60.9 %	61.4	74.2%	50%	77.8%	63.6%	81.3%	60%	62.5%	100%
Diabetics 65+, 5+ medications	90.9%	88.7	93.6%	83.4%	92.9%	90.8%	100%	80%	75%	100%
6. Diabetes "at risk" *										
40-49 year olds	94	5	2	3	0	12	2	1	2	0
50+ year olds	288	29	55	6	8	131	10	6	17	1

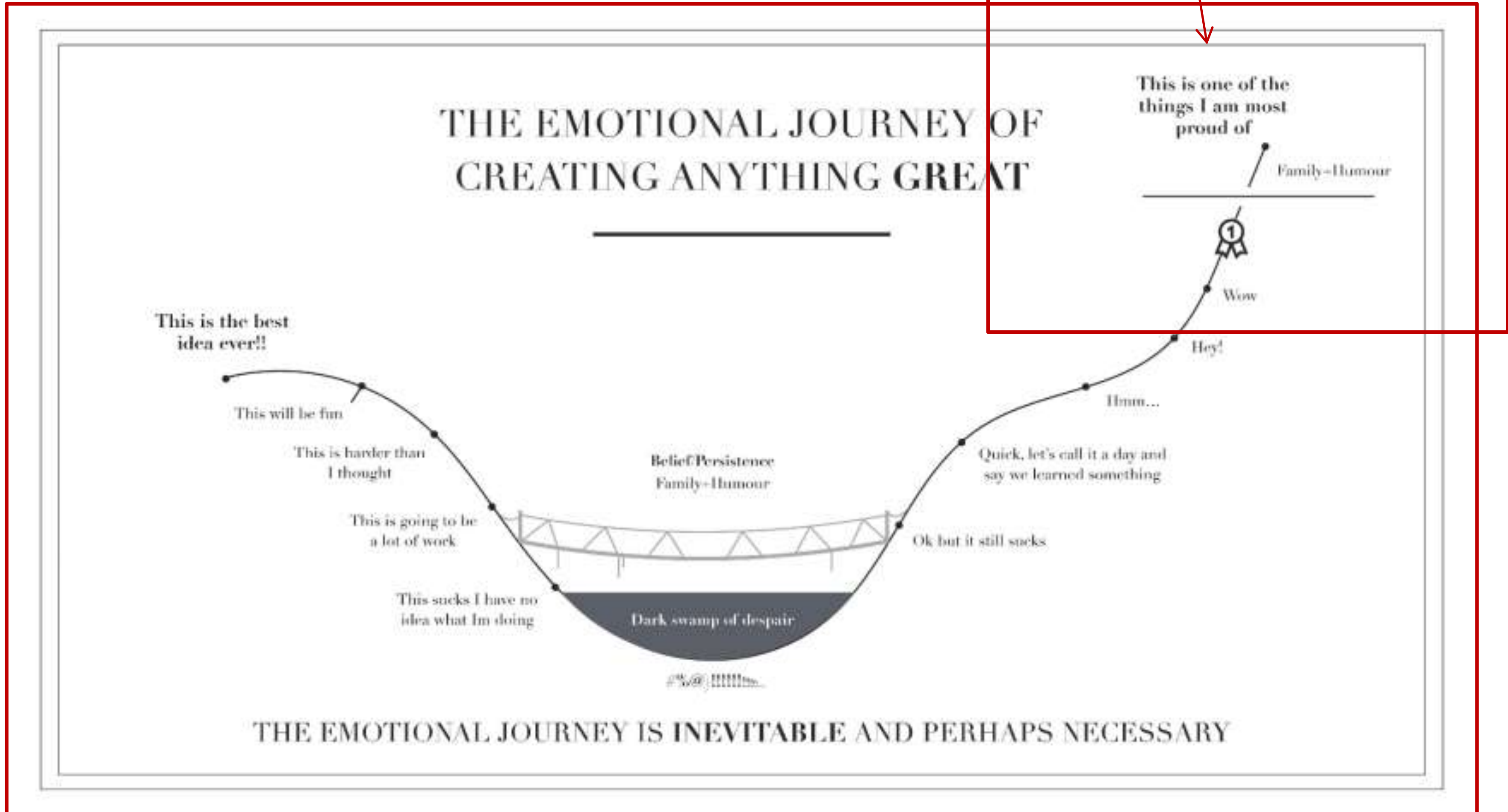
Improve Business & Improve Health Outcomes

Identify all patients with a chronic condition who would benefit from a GP Management Plan



Success!

Oh, what a feeling - celebrate!



Data Quality & Improvements

RACGP

Using Data for Better Health Outcomes
Standards for General Practices (5th edition) RACGP
Standards for General Practices (5th edition) Resource Guide – RACGP
Standards for General Practices (5th edition) Patient Feedback Guide – RACGP

Australian Digital Health Agency:

Importance of Data Quality
Data Cleansing & Clinical Coding
Data Quality Checklist

Train IT Medical

Data Aggregation using Pen Clinical Audit Tools (blog)
Cancer Screening & Prevention – Free Resources (blog)
5 Steps to Data Quality Success (blog)
Pen CAT4 summary sheet

Pen Clinical Systems

CAT4 Recipes

My Health Record:

Australian Digital Health Agency:

www.digitalhealth.gov.au

Get Started

On Demand Training (practise in the sandpit)

Training Resources

www.myhealthrecord.gov.au

Pathology

'NSW patients first to view their pathology results in My Health Record'

Train IT Medical:

Digital Health Free Resources including Pen CAT4

Developing a 'My Health Record' Practice Workflow (blog)

My Health Record – your questions answered (blog)

Top 30 questions doctors ask about My Health Record with Katrina's responses (blog)

Event Summaries (blog)

Katrina Otto's 'My Health Record' detailed presentation

Further Information – Health Care Homes

RACGP Standards for Patient-Centred Medical Homes

'5 ways team-based care changes the role of GPs' Dr Kevin Cheng in Medical Observer.

'Why we should consider patient registration and capitation' Dr Liz Sturgiss in Medical Observer.

'From good to great: the potential for the Health Care Home model to improve primary health care quality in New Zealand.' CSIRO Publishing

Pulse IT article 'Health Care Homes practices given a year to use compliant software'

Australian Association of Practice Managers (AAPM): AAPM Guidance for Health Care Homes

Health Care Homes WIKI

Dept of Health Recorded Webinar: Becoming a Health Care Home (11/2016)

Health Care Homes FAQs

Thanks for inviting me

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