

EXAMPLE

# Practice quality plan 2018–2019

## Practice improvements achieved in 2017–2018

Priority area	Improvement
<b>System level measures (SLMs)</b>	Met target of all SLMs except for cervical screening (high needs)
<b>Clinical effectiveness</b>	Implemented a new policy for all clinicians to use for test results. This included: <ul style="list-style-type: none"> <li>• patient portal</li> <li>• a standardised process</li> <li>• task-setting for urgent referrals</li> </ul>
<b>Clinical effectiveness</b>	Implemented an audit process to evaluate the use of standing orders, for example contraception
<b>Health and safety</b>	Reformed the practice hazard register into a risk register, aligning with current health and safety requirements and assigned risk criteria
<b>Health and safety</b>	Replaced older task lighting with new wall-mounted task lights
<b>Privacy of health information</b>	Scanned all patient hardcopy notes and uploaded into the patient management system (PMS) Stored large files (unable to be scanned) in a locked filing cabinet
<b>Human resources (HR)</b>	Introduced a new payroll system
<b>HR</b>	Introduced a new system for monitoring staff training and HR compliance records

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### Practice clinical goals and action plan for 2018–2019

Priority area: Clinical effectiveness			
Clinical goal	Action plan	Responsibility	Timeline
Become a teaching practice	Contact The Royal New Zealand College of General Practitioners regarding application and requirements	GP	September 2018
Employ a fulltime healthcare assistant (HCA) to move specific non (clinical) nursing duties from nurses to allow nursing staff more time to set up diabetic nurse led clinic	Prepare cost-benefit analysis for practice management  Prepare draft project proposal that includes job description and training programme for HCA	Practice manager Nurse manager	May 2018
Engage in Health Care Home (HCH) model of care	Contact PHO to arrange a presentation to the practice team, demonstrating the benefits of HCH	GP	October 2018
High standard of documentation in patient health record, meeting the standards set by the Medical Council of New Zealand and the Royal New Zealand College of General Practitioners	Implement action plan from record review to improve patient notes  Re-audit 'contact in case of emergency' documentation	All clinical staff	July 2018  September 2018
Implement a diabetes nurse-led clinic, one clinic per week	Nursing staff to write up a proposal for a nurse-led clinic to include: <ul style="list-style-type: none"> <li>• costings</li> <li>• resources required</li> <li>• process documents</li> </ul>	Nurse manager	June 2018
Participate in Safety in Practice (SiP)	Register practice's interest with SiP  Work with PHO to identify timeframes to commence SiP	Nurse manager	April 2019

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Practice physical space redesign – add two more clinic rooms, one for nurse-led clinic and one for registrar	Contract a project manager to develop proposal	GP owners	September 2018
Review bpac pharmaceutical utilisation report from 2017 (summary of most commonly dispensed medicines)	Individually review the report, reflect on pharmacological treatment received by registered patients, use as peer review	All GPs	Annually (following release of online report)
Undertake one quarterly audit provided by bpac and use as a peer review session	Individually complete the audit provided by bpac, collate results, use as peer review	All GPs	Quarterly

### Priority area: Health and safety

Clinical goal	Action plan	Responsibility	Timeline
Replace remaining two mercury sphygmomanometers (blood pressure machines) with electronic machines	Source quotes for cost to replace with one portable BP machine on wheels  Seek manager approval for expenditure	Nurses	June 2018

### Priority area: Patient experience

Clinical goal	Action plan	Responsibility	Timeline
Increase proportion of patients engaged in Patient Experience Survey (PES) by 25 percentage points	Promote PES to patients: <ul style="list-style-type: none"> <li>Hand out PES information</li> <li>Confirm email addresses are on file</li> <li>Send the PES by email</li> </ul>	Reception staff	Ongoing
Increase proportion of patients participating in the patient portal by 25 percentage points	Promote portal to patients: <ul style="list-style-type: none"> <li>Raise patient portal benefits during consultations</li> <li>Hand out registration information following consultations</li> </ul>	Clinical staff Reception staff	

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Priority area: System level measures			
Clinical goal	Action plan	Responsibility	Timeline
Improve cervical screening rates for high needs women by 10%	Review monthly list of overdue women, identify non-responders and individuals declining  Check list with the National Cervical Screening Programme Register  Send list to practice's outreach service	Nurses	Monthly