

QP12 PHO Results Report

Turanganui PHO



PINNACLE
General Practice Network

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CHANGE RECORD

VERSION/UPDATED ON	REASONS FOR CHANGE

Preamble

QP12 consisted of 12 goals, four of which related to population health, five related to Chronic Care Management, including Disease Coding, CVRA and Diabetes targets and three other Quality System objectives including Harm Reduction, Maintaining Accreditation Standards and Professional Development.

Of the 92 practices across the Pinnacle network eligible to complete QP12, 26 (26.7%) achieved a 100% score. Within Turanganui PHO, 3 of the 6 eligible practices (50%) achieved 100% as listed below: -

City Medical Gisborne Ltd
Desmond Road Medical Centre
The Village Clinic

This report summarises the QP12 practice results by PHO. For population health data (2yr immunisation, influenza vaccination, breast and cervical screening) and disease coding, comparison with QP11 results is also included.

GOAL 1: Child Health

Target:

- 90% of registered population of 2 year olds will be fully immunised.

Outcome:

2yr Olds Fully Immunised

	Eligible Population	Completed	Declined	Result*		Pure Percentage**
Turanganui PHO	518	423	12	83.6%	[90.2%]	81.7%

* Result % has been calculated using the formula:
completed / target – declines.

** Pure % has been calculated using the formula:
completed / target.

QP11 rates are shown in [].

Target:

- Practice reports on non-responders, by ethnicity and percentage referred to immunisation outreach services.

Outcome:

No available data

Comment:

Results show a decline in immunisation rates from QP11 with only 1 practice meeting the 90% target. An error in the Medtech immunisation audit meant practices were not able to gauge their progress toward the child health targets for this quality year. Despite assurances from Medtech that the report would be fixed throughout the year it was still not accurate for quarter 4. Data has had to be pulled from the Clinical Events Export to populate this goal and practices did not have an opportunity to analyse the data beforehand. There are concerns from practice and Pinnacle staff that the figures do not accurately represent the practices performance. The Pinnacle Quality Team will be working closely with practice teams to identify and iron out the concerns with the immunisation data.

GOAL 2: Influenza Vaccination

Target:

- 80% of practice's registered population of those aged 65 and over will be vaccinated against influenza by 30 June 2009.

Outcome:

Over 65 yr olds vaccinated

	Eligible Population	Completed	Declined	Result*		Pure Percentage**
Turanganui PHO	4169	2940	777	86.7%	[87.3]	70.5%

* Result has been calculated using the formula:
completed / target – declines.

** Pure % has been calculated using the formula:
completed / target.

QP11 rates are shown in [].

Comment:

Five practices achieved the 80% target. The PHO rate has decreased by 0.6% but remains above the target of 80%. Pinnacle Quality team staff will continue to work with practice staff to identify and iron out issues.

Target:

- Practice reports on number of registered population aged under 65 eligible for free influenza vaccination who have been vaccinated by 30 June 2009.

Outcome:

Influenza Vaccination Chronic Under 65yrs

	Total eligible popn vaccinated	
Turanganui PHO	1029	[898]

QP11 rates are shown in [].

Influenza Vaccination Continued

Target:

- 100% HealthRight enrolled patients (for whom a HealthRight entry form has been completed) vaccinated in 2009 season with adjustment made for declines.

Outcome:

Influenza Vaccination Healthright enrolled patients

	Eligible Population	Completed	Declined	Result*
Turanganui PHO	514	248	11	49.3%

* Result has been calculated using the formula:
completed / eligible population – declines.

GOAL 3: Cervical Screening

Target:

- 75% of practice's registered population of eligible women will have a current cervical screening result.

Outcome:

Eligible Women with a current screening result

	Eligible Population	Completed	Declined	Not Required	Result*		Pure Percentage**
Turanganui PHO	9783	6149	1077	949	79.3%	[70.9]	62.9%

* Result has been calculated using the formula:
 $\text{completed} / \text{target} - \text{declines and not required}$.

** Pure % has been calculated using the formula:
 $\text{completed} / \text{target}$.

QP11 rates are shown in [].

Comment:

The PHO and individual practices have achieved a percentage increase on the cervical screening rates and have exceeded the target 75%.

Cervical Screening continued

Target:

- Practice reports on non-responders by ethnicity.

Outcome:

	Total NR		NR as % of eligible popn	NR - Māori	NR- PI	NR - Other
Turanganui PHO	683	[1228]	7.0%	354	11	318

NB The definition of a non-responder was any eligible woman recorded as a non-responder to cervical screening

Key:

NR = Non Responder

PI = Pacific Island patients

Other = All other ethnicities

QP11 rates are shown in [].

Target:

- All smear takers provide consent for Pinnacle to access adequacy reports directly from the National Cervical Screening Programme.

Outcome:

- Smear takers provided consent to access adequacy reports.

GOAL 4: Breast Screening

Target:

- Practice reports on percentage of registered population of eligible women aged 45 – 69 years with a current breast screening result.

Outcome:

Eligible population with current screening result

	Eligible Population	Completed	Result*	
Turanganui PHO	4765	3259	68.4%	[67.1]

* Result has been calculated using the formula:
completed / target.

QP11 rates are shown in [].

Comment:

The PHO has shown an increase of 1.3% in the percentage of eligible women with a current breast screening result. This is a good result when considering the increase in the eligible population due to the widening of the age range to 45 – 69 years.

Target:

- Practice reports on percentage of Maori / Pacific Island eligible women with a current breast screening result

Outcome:

- 100% of practices reported on these results

GOAL 5: Disease Coding

Target:

- Practice meets coding targets for diabetes, hypertension, disorders of lipid metabolism, ischaemic heart disease, essential hypertension, heart failure, asthma, chronic obstructive airways disease, smokers and non-smokers by 27th March 2009

Outcome:

Coding rates across specified area

Disease Code (target %)	Turanganui PHO
Diabetes (3.5%)	4.0%[3.9]
Disorder of lipid metabolism (2.5%)	6.6%[6.1]
Ischaemic Heart Disease (5%)	7.2%[7.1]
Hypertension (5%)	10.7%[10.5]
Heart Failure (1%)	3.9%[3.1]
Asthma (10%)	12.1%[11.9]
COAD (1.5%)	3.9%[2.7]
Smoking Target combined (90%)	95.8%[92.8]

QP11 rates are shown in [].

Disease Coding Continued

Target:

- Practice provides line data re: those coded with the conditions specified about; age, gender and ethnicity

Outcome:

- Line data was sent electronically by practices and has been utilised in the production of the annual diabetes report.

Comment:

All coding rates have exceeded targets set for QP12

GOAL 6: Diabetes

Target:

- Disease coding rates as specified in Goal 5

Outcome:

- 83 % of practices achieved a disease coding rate of 3.5% or more

Target:

- 60% coded diabetics with a current annual review

Outcome:

	Eligible population	Diabetes Annual Reviews Completed (2008/09)	Percentage Achieved
Turanganui PHO	1266	870	69%

- 67 % of practices achieved a rate of 65% of diabetic annual reviews on coded diabetic patients

Target:

- A minimum of one practice nurse per 5000 enrolled patients is trained in diabetes Get Checked.

Outcome:

- 100 % of practices achieved this goal

GOAL 7: Cardiovascular Risk Assessment (CVRA)

Target:

- Complete a structured CVRA implementation plan confirming how the practice intends to identify and target patients for CVRA, what form of assessment tool will be used, how the result will be recorded in a retrievable form and how the practice will monitor coverage. A template is available for this report (see report sheet 7a).

Outcome:

- 100% of practices submitted an implementation plan for identifying and targeting patients for CVRAs.

Target:

- Achieve rate of 16% of eligible population* with a CV risk assessment undertaken and score recorded** in the 5 year period 1 July 2004 – 30 June 2009.

Outcome:

- 100 % of practices achieved a level of 16% or more recorded CVRAs

Comment:

The complex 'eligible population' for this group, as specified in the PHO Performance Programme, made it difficult to develop a resource for practices to gauge their progress towards this target during the year. This problem has been rectified for QP13. Rather than practices submitting data generated by a query the routine Clinical Events Export will be utilised for CVRA numbers and Pinnacle will feedback to practices more specific data regarding their assessments on a quarterly basis. Pinnacle Quality Team staff will work with practices to identify issues and find solutions to meet the 32% target for QP13

GOAL 8: Smoking Cessation

Target:

- Achieve disease coding rate as specified in Goal 5

Outcome:

- 100% of practices achieved this goal.

Target:

- Achieve rate of 80% of smokers aged 15 and over offered Quit Cards by the end of the reporting year.

Outcome:

- 25.38% of smokers aged over 15 were offered quit cards

Target:

- Achieve rate of 80% HealthRight, primary mental health and pregnant patients coded as smokers and aged 15 yrs and over referred to Turanga Health for smoking cessation (with adjustment made for declines).

Outcome:

- 44.59% of HealthRight, primary mental health and pregnant patients were given a referral to Turanga Health for smoking cessation.

Comment:

95.8% of registered patients in the Turanganui PHO, aged 15 and above and seen in the last 2 years, have their smoking status recorded. This exceeds the target of 90% and leads the Pinnacle network which has a combined rate of 87.7%.

The low percentage achievement towards the target of 80% smokers aged over 15 years to be offered a quit card is partially explained by the fact that only a proportion of all smokers would have presented at the surgery during the year. This issue has been discussed previously.

The rate for referral of Healthright, primary mental health and pregnant patients to Turanga health for smoking cessation was impacted upon by a number of issues that were also discussed during the Quality year. Some practices had undertaken a significant level of training for their staff to enable them to provide smoking cessation support in the practice, and so did not routinely refer. The practices also had difficulties with identifying pregnant patients and monitoring the continued state of pregnancy due to miscarriage or termination.

GOAL 9: Defining Nurse Activity

Target:

- Continue to record all nursing activities using zero invoicing and commencing using a universal code for immunisations, cervical smears, cardiovascular risk assessment and mammography.

Outcome:

- 100% of practices continued to record all nursing activities using zero invoicing. A team of nurses worked to identify the codes that are most commonly used by nurses to date and develop a template. The decision was made not to proceed with the advanced form as the network has moved to using Best Practice as the preferred tool for data collection.

GOAL 10: Harm Reduction

Target:

- Practice submits two harm reduction reports that have resulted in the review and / or modification of a particular practice policy or procedure

Outcome:

- 100 % of practices submitted two harm reduction reports and achieved this goal

GOAL 11: Maintaining Accreditation Standards

Target:

- Practice completes an assessment against the 2008 version of CORNERSTONE™ 'Aiming for Excellence' standard.

Outcome:

- 100% of practices completed a Cornerstone™ assessment with a Pinnacle Quality Facilitator.

Target:

- Practice has an action plan in place to address any unmet criteria.

Outcome:

- 100% of practices achieved this goal

GOAL 12: Professional Development

Target:

- Practice team (a minimum of 1 GP, 1 PN and 1 admin team member) attend the following sessions which will be organised collaboratively by Turanganui PHO and Pinnacle:
 - Medico-legal issues in general practice – Focus on Documentation
 - Diabetes: Improving outcomes for patients – A Team Approach

Outcome:

- 100% of practices achieved this goal

Target:

- Practice Managers – 5 hours PD
Receptionists – 4 hours PD

Outcome:

- 100% of practices achieved this goal.