Big Changes at Little Natimuk

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West Wimmera Health Service

Introduction

The Plan, Do, Study, Act *(PDSA) Model for Improvement* project has been a 12 month project that aims to improve care for clients with chronic and complex conditions through improved systems of practice.

West Wimmera Health Service (WWHS) worked closely with the Natimuk General Practice to improve feedback, referral acknowledgement and communication between Allied Health and General Practitioners (GPs).

WWHS undertook small rapid cycles of quality improvement during 2011 using the PDSA Model for Improvement. A key feature of the approach was the use of data to measure change and effect.

WWHS has tested a variety of change ideas and worked closely with the GPs to grow and sustain work in chronic care systems improvement.

Methods

Building an improvement team
We systematically looked at the areas in which we were able to improve upon and developed our project aims. These were to improve communication with General Practice and to increase referrals at the Natimuk Campus by 50% by September 2011.

Understanding our business
Through liaising with General Practice we were able to ascertain the level and quality of feedback required and then developed a one page feedback form which complied with Victorian standards. This has now become an invaluable tool which has been essential in allowing General Practice to realise the scope of Allied Health services at West Wimmera Health Service.

Changing our business systematically and proactively
Following the process of the PDSA program our team met regularly and undertook small improvement cycles working closely with the Wimmera Primary Care Partnership (PCP) and West Vic Division of General Practice to test ideas and develop long term improvements across our health service.

Involving clients in developing pathways
We developed a multidisciplinary diabetes team which now consults fortnightly. This team includes the Doctor, Diabetes Educator, Dietitian and Podiatrist. This holistic approach has put the client at the centre of our practice and has improved health outcomes and access to services.

Leley Robinson (DNE), Dr Jim Thomson (GP), Sarah Natali (Pod) & Morgan Sandeman (Dietitian)

Adapting a multi-skilled, multi agency approach
The changes were implemented with the support of immediate and senior management and a protocol has been developed to ensure the work is not lost. The feedback tool has been rolled out over the five other sites of West Wimmera Health Service and across the Allied Health, Community Health and District Nursing departments.

"I reckon it's good; being able to come up here and not have to go into Horsham" *Len Pilmore Natimuk resident and client.*

"Everyone is very happy with the way their visits are coordinated. There is less waiting and people who work can do all their check ups in a single day" *Norma Hudson, GP Receptionist.*

Results

Plan, Do, Study, Act has significantly improved communication and relations with the Natimuk General Practice. We are now receiving written referrals rather than verbal and the quality and appropriateness of referrals have improved.

We have dramatically improved the availability of health services to Natimuk and have therefore improved health outcomes for a previously underserviced area with a high risk farming clientele.

At Natimuk we are now providing 100% feedback to General Practice including failure to attend appointments. This is consistent, timely and appropriate throughout the course of care.

We are now receiving significantly more referrals as a result of this Project.

Number of referrals received at Natimuk		
Discipline	**Mar-Dec 2010**	**Jan-Sept 2011**
Podiatry	2	40
Dietetics	0	11
Diabetes Ed	5	45

Discussion

Plan, Do, Study, Act has been a fantastic way of improving services to a town with a population of 460 people. We have knocked down walls, literally, to create a dedicated Allied Health treatment room which means that Allied Health are now able to consult in Natimuk every day rather than fighting for use of a shared room with the doctor.

Traditionally clients from Natimuk have travelled 26kms to the regional centre to access Allied Health services. From our PDSA improvements we are now finding this trend has reversed and people from local and neighbouring communities are travelling to our clinic at Natimuk to access the services we provide.

Our GP has embraced our improvements and has started using the PDSA cycle, making changes and improvements to his Team Care Arrangement form so that it is better suited for the Allied Health team.

We have had major issues with introducing electronic referrals due to IT complications. PDSA has allowed us to push for change and the GPs have agreed to change their email server so that this can be facilitated.

The PDSA approach has been so successful that West Wimmera Health Service will incorporate it into their future project planning in chronic disease management.

Conclusions

The Plan, Do, Study, Act improvement cycles have proved a successful way to implement change.

Support from the Wimmera PCP, the Department of Health and West Wimmera Health Service has been essential to the success of this Project.

Small changes lead to big things and by using PDSA to increase the number of referrals we have been able to create an Allied Health hub at the Natimuk campus.

Further information: www.wwhs.net.au

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