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| **GOAL:** *(Specific, Measurable, Achievable, Realistic, Time-limited)* | To increase practice capacity to deliver high-standard patient care remotely due to COVID-19 pandemic | |
| **TIME FRAME:** | *March 2020* | *November 2020* |
| **MEASURE:** | Maintain number of care planning appointment, practice revenue, and patient appointment numbers throughout pandemic. | |
| **STARTING POINT:**  *Background information*  *Initial discussion* | Morning huddles with all practice staff to discuss care delivery   * PM met with GP’s to discuss delivery of telehealth, confirming nurse involvement * PM met with nurse to confirm new telehealth procedure | |
| **IMPROVEMENT IDEA:**  *Engage team*  *Brainstorm ideas*  *Decide which idea* | * Set up 2 x additional outgoing phone lines to cope with phone demand (Doctors to use mobiles in the interim) * Purchased headsets for each clinical staff member for WHS * Updated SMS reminders to clearly communicate appointment type (telehealth vs face to face) * Purchase and install webcams to facilitate telehealth video calls * Review telehealth video call platform (Skype not appropriate, change to healthdirect) * Created new email address to facilitate e-referrals * Procedure for electronic referrals & upload of information to CIS * Doctors and nurses both able to email from the patient chart using new email address * Upgrade to digital fax system for robust communication systems | |

Step One: Consider the Change Management

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| **WHY will we do this?**  **What difference will it make?** | **Importance of doing this** *See QI starters for more information***Team Score 10/10** |
| Understand the depth of the team’s motivation to overcome the problems as they arise, complete the change and sustain the change. The stronger the motivation, the greater your likelihood of success.  *See QI starters for more information* |
| **What difference will this idea make to patients?**   * Patients can confidently access their doctor and know that they will receive the same high quality care via telehealth * Reassure patients that outcomes from appointments (referrals, pathology orders, scripts) are managed as needed |
| **What difference will this idea make to clinicians?**   * Clinicians can become more diverse in how they can deliver health via new technological mediums * Clinicians can become confident in caring for their patients remotely | **Confidence we will succeed**  *See QI starters for more information*  **Team Score**  **10/10** |
| **What difference will this idea make to the practice?**   * Minimise frustration and fear generated by uncertainty from pandemic * Maintain business viability and excellent patient care during pandemic |
| **What difference will this idea make to the health system?**   * Patients will receive best quality care, safely, during pandemic |

Step Two: Planning-Testing-Analysing

|  | **PLAN THE TEST** | **RUN THE TEST ON A SMALL SCALE** | **ANALYSE RESULTS AND COMPARE AGAINST YOUR PREDICTION** |
| --- | --- | --- | --- |
| **START TESTING** | **Who will do what, when and by when?**   * Commence regular appointments via telehealth, mainly phone call. * Gather baseline data on appointment numbers, types and business revenue * Pilot of telehealth video call appointments using Skype | **Start date of test**  March 2020  **End date of test**  1 week | **Results**  Phone lines are tied up, patients can’t call to make appointments. Doctors and nurses require headsets for calls.  SMS reminders were not clear enough for some patients, phone lines tied up with even more with confusion regarding appointment type  Video call platform not secure or high-quality enough for clinical call.  **Problems? Need more steps? Keep testing (below)** |
| **KEEP TESTING – FIX PROBLEMS OR TAKE ANOTHER STEP** | **Who will do what, when and by when?**  Update outgoing SMS appointment reminders. Purchased clinician headsets for telehealth calls  Order new digital phone and system via IT provider  Upgrade to HealthDirect video call platform, run telehealth video call appointments via new platform, include clear access instructions for patients in reminder. Purchased HD webcams for clarity.  PM to create new email policy to support changes to workflows within pandemic and altered communication requirements | **Start date of test**  April 2020  May 2020  **End date of test**  June 2020 | **Results**  Patients clear on how they were accessing care from doctor  Video call platform an improvement, however under-utilised due to low technical confidence  Fax systems failed regularly with increased workload  Increased incoming clinical referenced emails (images and questions from patients) coming into reception email.  All clinical staff need to be able to send and receive clinical information via shared email, linked to CIS due to change of workflow in pandemic. Doctor’s email needed to remain private. |
| **KEEP TESTING – FIX PROBLEMS OR**  **TAKE ANOTHER STEP** | **Who will do what, when and by when?**  Generic clinician email created and linked to CIS. New protocol shared with practice staff  Digital fax system procured to increase capacity to send referrals and clinical communication | **Start date of test**  August 2020  October 2020 | **Results**  Lots of incoming emails from patients responding to clinician email  **Problems? Need more steps? Keep testing (below)** |
| **KEEP TESTING – FIX PROBLEMS OR**  **TAKE ANOTHER STEP** | **Who will do what, when and by when?**  PM added pro-forma response to incoming emails of a clinical nature | **Start date of test**  December 2020 | **Results**  Processes now business as usual |
| **ROLLOUT TO BUSINESS AS USUAL** | **Who will regularly do what, when and by when? How will you maintain your improvement (what is your plan B if staff are on leave, etc)?**  All practice staff, including doctors, nurses, admin and practice management are aware of new communication processes and procedures.  Monthly team meetings provide a forum to discuss any changes required or suggestions for further improvement  **What data will you collect to review your progress?**  Number of regular appointments, care plan appointments and business revenue has been maintained  Nurse allowances increased  Patients now requesting and paying for telehealth appointments (convenient and appropriate for some patients) | | |
| X MONTH REVIEW DATE: | | |

Appendix I SMS reminder text

<Patient Given Name>, you have a to face appointment with Dr Lerm's Surgery on <Appointment Date>, at <Appointment Time>. Please only reply Y to confirm or N if not coming Thanks.

We then sent telephone and video appointments separately which reads as follows:

<Patient Given Name>, you have a telephone or video appointment with Dr Lerm's Surgery on <Appointment Date>, at <Appointment Time>. Please only reply Y to confirm or N if not coming Thanks.