The General Practice Improvement Tool: Improving the quality, integration and sustainability of Australian primary health care

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Background
Extensive work has been undertaken in the design and implementation of quality improvement tools and frameworks for tertiary care settings. There is a lack of a systematic approach to quality improvement in Australian primary health care with the majority of work focusing on single-strategy approaches such as audit, professional education or patient safety and risk management measures. Relatively few tools have been designed for, and rigorously trialled within Australian primary health care settings. This paper describes the development and pilot of a new general practice improvement tool (GPIT) for use in Australian primary health care.

Methods
During phase 1, a comprehensive literature review of 55 publications identified key gaps in the assessment elements currently contained in a range of quality improvement tools which were relevant to primary health care. In addition the literature review identified several key tools and frameworks which have been used to improve practice function in primary health care settings. These included the EFQM Excellence Model, the microsystem assessment tool (MAT) and the Malcolm Baldrige criteria. A case study was conducted using a high function general practice to trial the use of the MAT in a general practice. The combination of the results from the literature review and case study were then used to inform the development of a new General Practice Improvement Tool (GPIT) and mode of delivery.

Phase 2 focussed on the pilot and content validation of the new GPIT with a range of 6 general practices in the Queensland, Australia. Using this new tool, practices, engaged in a Plan-Do-Study-Act cycle. Feedback (both quantitative and qualitative) was sought from all staff on the efficacy, appropriateness and acceptability of this new tool to facilitate quality improvement in primary health care. Additional feedback was sought on a train-the-trainer approach which used Practice Managers as facilitators. Data were also collected in relation to a range of validation methods. All data were gathered using structured survey tools and in-depth interviews. Final changes were made to the content and layout of the new tool. The final stage will incorporate the trial and factor analysis of the finalised GPIT in the broader primary health care setting.

Outcome
A validated and effective tool for use in improving the quality, integration and sustainability of Australian primary health care.