

CQI: EVERYBODY'S BUSINESS

Northern Territory Continuous Quality Improvement Strategy

COMMUNIQUE IN QUALITY

WELCOME TO THIS EDITION



*In this issue of the
Communique you will find:*

- 🌲 **Where has 2014 gone**
Page 1,2 and 3
- 🌲 **CQI Collaborative
Workshop**
Page 4 and 5
- 🌲 **Men's Health and
Wellbeing**
Page 6
- 🌲 **Sharing CQI Stories**
Page 7
- 🌲 **Making Sense of Systems
for Improving Health
Promotion**
Page 8
- 🌲 **Smear Campaign**
Page 9
- 🌲 **Collaboration in child
health in Gove**
Page 10
- 🌲 **QUALCON 2014 in Adelaide**
Page 11 and 12
- 🌲 **Photo Gallery**
Page 13-15

**We wish you all a very happy &
relaxing Christmas.**

**We look forward to working with you
in 2015**

We hope you enjoy this issue of the Communique in
Quality and have fun seeing some of the people we
have caught up with during the year.



COMMUNIQUE IN QUALITY



Where has 2014 gone...

This year saw regional CQI Collaborative being held in East Arnhem, Katherine and the Barkly. Data was shared and agendas were driven by local concerns and initiatives that were shared generously by government and community controlled health services alike. Just some of the benefit of the regional Collaborative is the ownership of issues that are shared, the discussion is “closer to home” and that more staff are able to attend.



CQI workshops for ATSI staff continued throughout 2014. These positive workshops were filled with enthusiastic AHP and Indigenous health service staff who wanted to know more about CQI. Not just “what is CQI?”, but to learn about CQI tools and how to use them. Tools that present real data or give us information that tell the story (audit tools), how to identify issues/gaps in service (data analysis and SWOT), how to generate ideas (brain storming) and problem solve (PDSA). They were great days, with encouragement by those who attended to increase the content and complexity of future workshops.

One21seventy Foundation Training continued in 2014 in Darwin and Alice Springs with good representation from government and Aboriginal Community Controlled health services.



The NT CQI Strategy was well represented at national conferences this year. Presentations by the CQI Program Coordinators were delivered at the Lowitja CQI Conference in Melbourne in March and the NACCHO conference, also in Melbourne, in June. The NT CQI Strategy was also in the forefront of discussions on the need for a National CQI Framework.

A highlight for the CQI Facilitators this year was the professional development two days workshop, presented by Laurie Kelly from Mindworks. The workshop, titled “Possibility Thinking”, focused on self-care, igniting the passion for quality and empowering people, exciting and sustaining champions and partners for quality. A great two days where our minds did not stop and where we discovered ‘change of state’ exercises that keep the audience on the ball and on topic!



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Where has 2014 gone...

The CQI Steering Committee met in June to work on one of the recommendations of the NT CQI Strategy Evaluation made by Allen+Clarke. The Program Logic and the revamped NT CQI Strategy model have now been endorsed by Forum – the NT Aboriginal Health Forum (see attachment for the chart on page 3).

As the year comes to a close and in this, our final edition of the Communique in Quality newsletter for 2014, we can look back at the increasing uptake of CQI activities and interest shown by staff in health services – big and small. The NT CQI network continues to grow and as a result of this, staff are using their data, while strategies and systems in health services reflect small steps towards improving health outcomes for our patients. Wishing all of our readers a happy Christmas and a New Year of good health, job satisfaction and that CQI increasingly becomes “everybody’s business”.



CQI Collaborative Workshops in 2015

Your input would be appreciated

We are in the process of planning dates, themes and speakers for next year’s CQI Collaborative. We would love to hear from you if you have ideas about potential speakers or if you have a topic you would like us to consider through a CQI lens. Please contact Kerry or Louise to discuss.



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Louise Patel

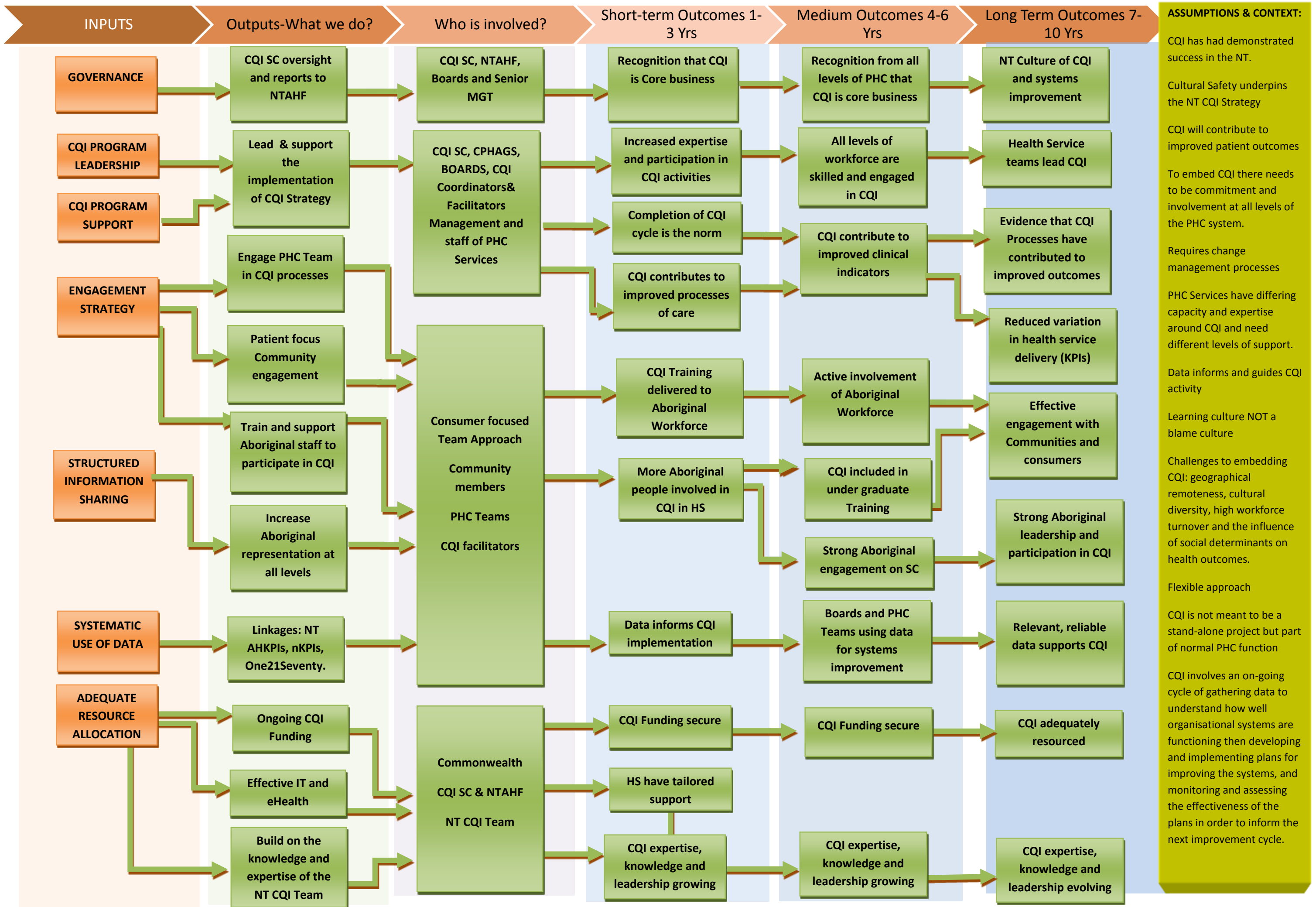
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NT CQI STRATEGY – PROGRAM LOGIC FRAMEWORK



COMMUNIQUE IN QUALITY

CQI COLLABORATIVE WORKSHOP



Olga Havnen, DD CEO gave an opening address

The 8th NT CQI Collaborative was held on the 11th and 12th November in Darwin. What a couple of interesting and informative days they were.

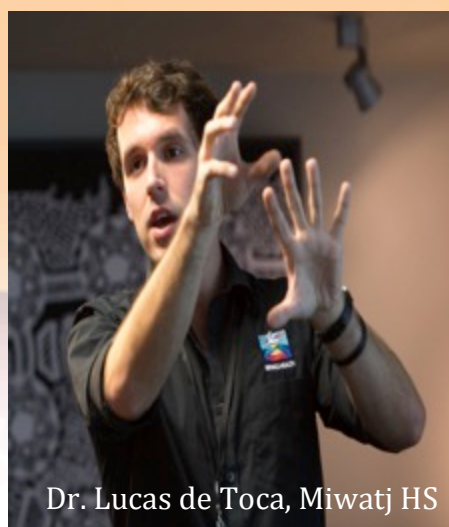
With just under 120 people in attendance on both days, the room was buzzing from start to finish. Speakers from the Top End and Central Australia, from remote and urban health centres filled the room.

After the Welcome to Country from Nadine Lee, Olga Havnen, Danila Dilba CEO, gave the opening address. Her message was that practice or processes have to change to see change in outcomes or outputs, and when you're not successful, try something different again.

As the theme for day one was "Data Makes You Smarter", our first plenary speaker and great supporter of CQI, Dr Christine Connors, emphasized the message of using data for change.

Dr Lucas de Toca shared his story of CQI at Miwatj Health, how they use their data and the learnings from the regional CQI Collaborative and CPHAG meetings that have been held in East Arnhem. Lucas talked about the benefits of sharing data on a regional level to support the development of regional strategies for improvement and service planning.

The table top sessions on both days once again had everyone listening to short stories on quality initiatives undertaken in small clinics for children through to national organisations that cater to remote health staff. The day one concurrent sessions covered men's health, women's health and how data is being used to inform and improve practice and service delivery in real life situations.



Dr. Lucas de Toca, Miwatj HS



Nadine Lee



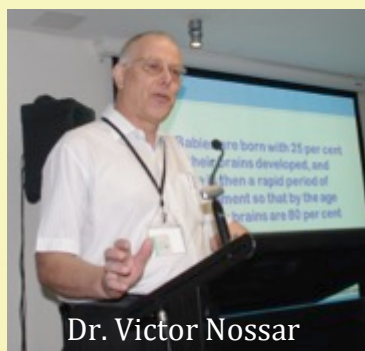
Dr. Christine Connors



COMMUNIQUE IN QUALITY

CQI COLLABORATIVE WORKSHOP

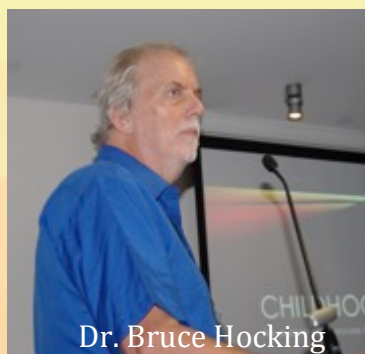
The second day of the CQI Collaborative saw everyone just as engaged and interested in the topic for the day – Childhood Anaemia. Once again we had some expert plenary speakers.



Dr. Victor Nossar

Dr Victor Nossar gave us food for thought on the importance of preventing the development of health, behavioural and developmental problems in young children before they become established, by supporting best possible early childhood development for every child. Heather Ferguson followed up with her message – that health risks to young children are largely established prior to and/or during pregnancy and in the first 2 years of life.

Dr Bruce Hocking, medical director at Wurli Wurlinjang, presented on Wurli Wurlinjang's approach to identifying and treating childhood anemia and shared a video starring Wurli staff that they have developed.



Dr. Bruce Hocking

Dr Nikki Percival, a research fellow from Menzies, who introduced tools that support health services to gather information about health promotion.

On review of the evaluations, overall, it was a very successful workshop, the speakers were well appreciated, there were lots of positive take home messages to be shared with those who could not attend, and there were a greater number of first time attendees and the atmosphere encouraged participation.

We also saw the need for a bigger space if we were to have such a large group, whilst being told we could have been more generous with time to network and that having larger groups at the table top sessions meant louder voices. Something that we will look at again for the next Collaborative is the need to share men's health concerns (being culturally appropriate of course) to all health centre staff.



Dr. Nikki Percival

Thank you for providing this important feedback to us. It is important and useful in preparing for the next CQI Collaborative. And thank you for participating so generously in all of the CQI Collaborative held around the NT this year.

So, in this, the last Communique in Quality newsletter for 2014, the CQI teams wish you all a Happy Christmas and only good things for 2015.



"The Collaborative was great. I really enjoyed Victor's presentation -full of knowledge" quote from attendee



“Men’s Health and Wellbeing”

CONCURRENT SESSIONS AT THE CQI COLLABORATIVE

The first ever “Men’s Health and Wellbeing” session to be held out at one of our CQI Collaborative was a huge success and we hope to make it a permanent part of future Collaborative. We had many non-male participants clamoring to take part but in the interests of fostering a safe environment for discussing Men’s Business, it was run as a men only session.



David Dacey –DoH Outreach CA

Our first presenter was David Dacey who is an Aboriginal Male Health Coordinator from Central Australia. He spoke particularly about the newly established Men’s Health Action Group (MHAG), which is a collaboration of stakeholders in Men’s Health. MHAG has helped organize several events including health forums, the male health reference group and supported the establishing of Men’s Centres (Sheds) across Central Australia. He also spoke about the ‘Beyond the Darkness’ Postie bike run that they supported where a group of men from Strathalbyn (SA) who had lost friends to suicide rode their bikes up to the Centre to raise awareness about depression and suicide. MHAG Will continue to work towards ensuring culturally appropriate services for men exist in communities through men’s centres, clinics, male staffing and training.



Steven Torres-Carne

Next was Steven Torres-Carne from the Aboriginal and Torres Strait Island towards healing the wounds of past government policies and practices and helping to connect people to culture and spirit. Currently 3 separate Men’s Healing programs are being run across the Territory in Maningrida, Wurrumiyanga and Ngukurr. These wholistic programs have been successful in engaging many men in their communities and have been helping them strengthen ties with culture and support the development of men’s roles in family and community.



Ronnie Ogilvy

Our third presenter was Ronnie Ogilvy from Strongbala Katherine Male Health Program at Wurli-Wurlinjang Health Service. He provided an outline of their grass roots programs including the Men’s Health Service, the Justice Program and Cultural revitalization program. The wholistic 12 week Justice diversionary program continues to be a great success. The Strongbala football team that is part of the Cultural revitalization program (and supported by the Healing Foundation) has also been helping men kick goals on and off the field. Most importantly Strongbala provides a culturally safe space for men to gather & heal, particularly through friendships and education.



Phil McMahon and Mark Ramjan

Written by Iyngaran Selvaratnam – GP Registrar at AMSANT and Danila Dilba



“Great to hear perspectives and experience shared from both community control and government.”

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“Sharing CQI Stories”

CONCURRENT SESSIONS AT THE CQI COLLABORATIVE

The Sharing Stories in CQI concurrent session was the most well attended at the Collaborative and there wasn't a spare seat in the house, with several bums on carpet. We had 4 groups of presenters talking about 4 very different services & programs and how they have been able to innovate and deal with the particular challenges that they face using a CQI approach.



Jessica & Dorothy from Ngalkanbuy

Julianne Carney who is the PHCM from Gapuwiyak Health Centre and Celia Gallo the EA CQI Facilitator spoke about the several improvements that have been made in the service following it coming under new management in 2013 using CQI processes such as the Plan, Do, Study, Act Cycle and NT KPIs. This had led to improvements such as redesign and use of clinical spaces, increased community visits, reduced acute on chronic presentations, and increased chronic disease self-management and a reduction in recalls. They left us with the message that PHCMs who are motivated and provided with data, tools, system and management support have increased confidence to approach reorientation of health services and thus better serving their communities.

Lauren Roberts and Dr John Kelly from the Laynhapuy Homelands Aboriginal Corporation spoke about their revolutionising of their Outpatient booking and travel scheme using the PDSA cycle. With the clinic footing the bill directly for patient travel a 48% non-attendance rate was sapping financial resources away from other services. By employing a travel coordinator and delegating all travel approvals to the local GP they have been able to boost attendance to an incredible 93%. Clinicians and administrators from across the Territory should be taking notes!

Lesley Wolfe the Chronic Disease & Care Coordination Program Manager at Danila Dilba Health Service spoke about how chronic disease care needs to be everybody's business in the clinic. She spoke of the challenge of how to maximize the effectiveness of such a large team of care coordinators, family support workers, aboriginal health practitioners, GPs and visiting specialist and allied health services. Improvements through CQI is also important part of their ethos through their Clinical governance committee, use of KPIs, HMRs and participation in research.



Liz Ritter (RAN) from Laynhapuy Homelands and Sagen Wilks (RN), a Project Officer from Menzies School of Health Research spoke about using a CQI approach to improve compliance with secondary prophylaxis for Rheumatic Heart Disease Clients in the Homelands. Research suggests that up to 30% of cases of Rheumatic Fever in the NT are recurrences, which are often due to late and missed LA Bicillin doses. The project is focused using a Chronic Care model as a framework in 10 community clinics, each with their own individual action plan that they developed. Changes have included using the 'days at risk' indicator for monitoring, better roster planning, reminder cards, education and improving communication & information sharing.

Written by Iyngaran Selvaratnam – GP Registrar at AMSANT and Danila Dilba



“I learnt more about the importance of data and KPI priorities – we ARE making a difference”

“Making Sense of Systems for Improving Health Promotion”

Workshop at the NT CQI Collaborative

Catherine Devine (Health Promotion Strategy Unit, NT Health), Catherine Street (PHC Outreach TEHS), Karen Hobday Street (PHC Outreach TEHS), David Reeve Street (PHC Outreach CAHS), Alison Laycock (Menzies School of Health Research) and Nikki Percival (Menzies School of Health Research).

Throughout 2014, NT Health and Menzies have been working in partnership to plan implementation of Health Promotion CQI (HPCQI) in the NT. An action research approach to implementation science has been used to investigate readiness to implement the One21Seventy HPCQI tools. Implementation planning has highlighted the importance of defining the purpose and goal of implementing HPCQI, training required, roles and responsibilities and preparation of the data/record system for audit. A small trial of the HPCQI tools was carried out by the Top End and Central Australian Primary Health Care Outreach teams using projects documented on QIPPS. The HPCQI tools were simple to use and the protocol was clear and easy to understand. Data was entered into the CQI website and a report was generated. Feedback sessions were provided to teams and managers. Preparations are underway for the first phase of HPCQI audits.

For a Clinical Governance Guide contact Marcia Hakendorf at marcia@crana.org.au introduced the CRANaplus

Michael Roseth introduced the italk library – an innovative way for our clients to access general and health information in language

Alison Laycock reported back on the work being done on putting briefing papers into plain language



The next step in planning HPCQI implementation is to become familiar with the HPCQI Systems Assessment Tool (SAT). The workshop at the CQI Collaborative in November 2014, focused on the HPCQI SAT to analyse components of the system that support best practice Health Promotion. Nikki Percival (Menzies) provided an overview of the four system components: Service Delivery System, Information and Decision Support, Organisational Environment and Adaptability and Integration of Systems. At the workshop, 25 participants from a range of NT Health teams and non-government organisations broke into 3 groups to participate in a facilitated discussion around system components. Useful information was gained from the discussions. In many cases health services systems had some components in place however they were not well known or used consistently. The information gathered will be used to assist further planning of HPCQI implementation.



“Smear Campaign”

CONCURRENT SESSIONS AT THE CQI COLLABORATIVE

“Let’s face it, no one likes pap smears”. But attendees at Day 1’s Smear Campaign session did enjoy the opportunity to discuss the unique challenges that face Aboriginal primary care services in achieving high Pap smear participation rates. Jacqui Murdoch from AMSANT presented some of the creative solutions that services use to achieve good results – combining opportunistic screening with “blitzes”; ensuring priority lists are up-to-date for the arrival of visiting certified staff; the importance of Aboriginal staff in creating culturally safe spaces; and how to dig deeper when women decline.

Celia Gallo presented on behalf of Cate Ogle about the reasons for the success of Gapuwiyak’s 2011 Women’s Health Week. Priority lists were drawn up, Aboriginal health practitioners and community workers were heavily involved in pre-education and during the week, and a supernumerary staff member was able to devote time to planning and implementation. The session finished off with a vigorous discussion about how much information constitutes informed consent for a screening test, and what effect the proposed changes to five yearly HPV screening may have in our context. Stay tuned for the final report on this project which will cover all this and more, to be distributed in early 2015.

Written by Jacqui Murdoch – PH Registrar – AMSANT.



“In God we trust, all others must bring data.”

W. Edwards Deming



“All improvement happens project by project and in no other way. — Joseph Juran”



Collaboration in child health in Gove



Photo: Participants at the CQI collaborative

On Wednesday 29 October, Nhulunbuy hosted an East Arnhem regional Continuous Quality Improvement Collaborative workshop on childhood anaemia and growth faltering.

This was a joint enterprise including Department of Health staff, Miwatj Health and AMSANT.

A number of visual presentations and collaborative workshops addressed the strategies to increase detection and reduce rates of childhood anaemia.

Health services agreed to “generously share successful strategies” and build on strengths and areas of success. A fantastic collaboration and example of this great community’s spirit.



East Arnhem Childhood Anaemia Collaborative



Barkly CQI Workshop for Aboriginal workforce



“There are two different kinds of people in this world: those who finish what they start, and — Unknown”



The NT CQI Program Coordinators attended Qualcon 2014 in Adelaide in

The conference, titled, “Discovering Quality: the Portal to Sustained Success” saw representatives from sectors that covered the automotive industry, defense, education, health, government, mining and business, large and small.

The theme encompassed the following ideas:

- 🧐 Discovering quality – The relevance of new and traditional quality tools for today’s society and economy
- 🧐 Sustained success – The role of quality in enhancing performance excellence
- 🧐 Portal – how technology is going to help shape the gateways to the future.



At the Conference, a member of the Australian Organisation of Quality, Mr Craig Ottaway, was awarded the J.M. Juran Medal.

Joseph M Juran – a quality management guru – was deeply involved in management and particularly the management of quality.

The purpose of this award is to recognise persons who have contributed in an outstanding way to the application of effective quality management in Australia. To receive this honour the winner must meet the following criteria:

- 🌟 Meritorious service to AOQ
- 🌟 The direction of important work in the application of Quality in Australia
- 🌟 Outstanding contributions to training of Quality practitioners
- 🌟 Leadership of an industry or industries into good quality practice
- 🌟 The publication of articles and books of merit on quality

Surrounded by our very own Australian quality management gurus – we met five Juran medalists at this Qualcon – we took the opportunity of informing them of the quality initiatives being undertaken by PHC staff right across the NT. WE could not resist the opportunity to share one of our CQI shirts with Mike McLean, a previous Juran Medalist and facilitator of a conference workshop, “Plan on a Page”. Mike introduced us to thought provoking YouTube clip screened at the start of the Darwin CQI Collaborative.



“Don’t let facts, logic and data get in the way of ignorance, perception and prejudice” Mike McLean



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Continue.....

Another highlight of the conference were the presentations made by the Indonesian delegation on the quality improvements made to sections of the oil and gas industry, e.g., development of a piece of equipment that was used to clean gas pipes. This prevented corrosion that had in the past lead to gas leaks. The role plays and introduction to their culture was well received.

Quotes from Qualcon

“Quality and Improvement – make it the heart of your business”

“Inspire people to rise above the ordinary”

“Be hungry for the taste of success.”

“Good better best and beyond”

You want quality in what you are, in what you see and in what you do”

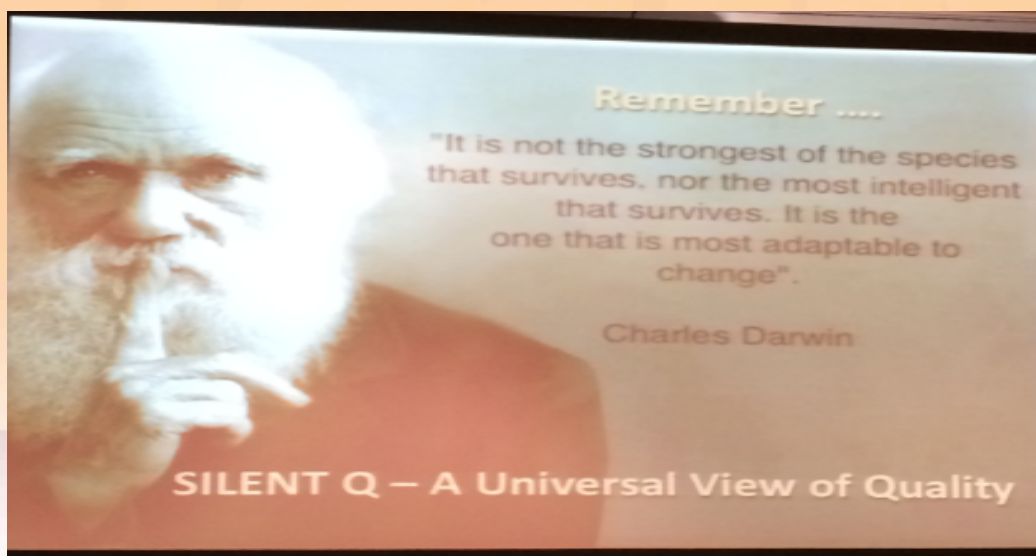
“The absence of quality is felt and remembered by everyone. It is or it isn't!”

“Excellence is a habit that leads to contentment. Mediocrity is second best and leads to misery”

“Delight your customer!!”

The 5 most Important Question

- ✓ What is our mission?
- ✓ Who is our Customer?
- ✓ What does our customer value?
- ✓ What are our results?
- ✓ What is our plan?



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CQI Collaborative 11th & 12th November 2014 – Photos fun!!



Merry Christmas



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THROUGHOUT COMMUNIQUE

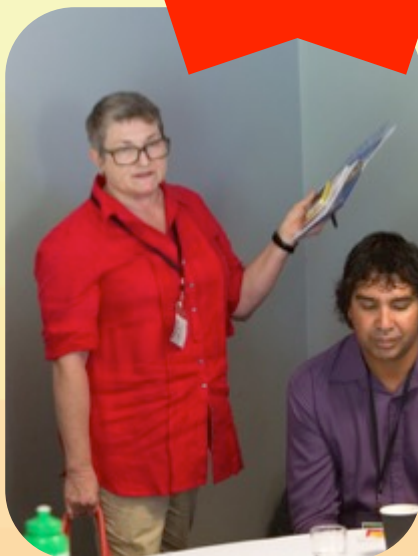
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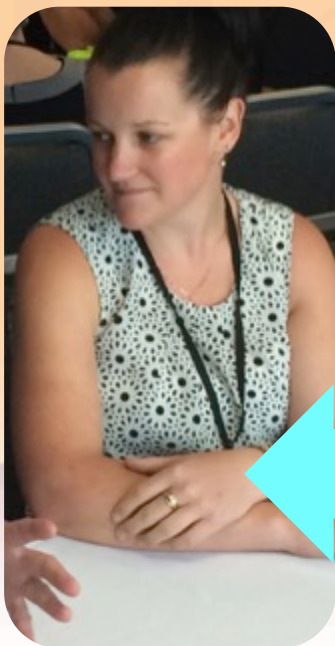
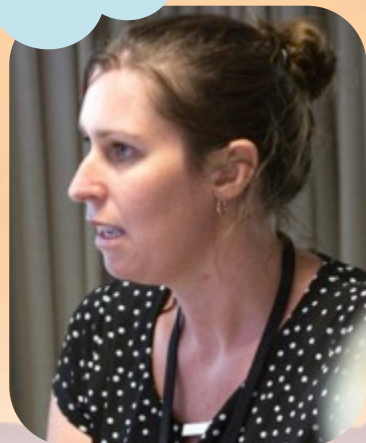
Scott Weily and Lindsay Parsons from CAAC told of the success they are having with their paediatric RHD patient



Marea Fittock encouraged use of the RHD smart phone app



Gypsy Dejong introduced us to Teleotology

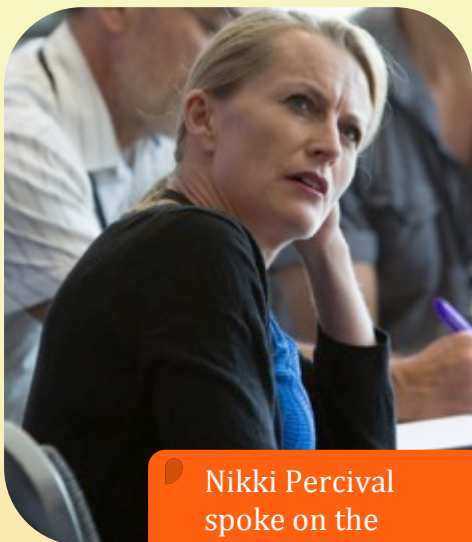


Bridie Gould and Clare Callaghan – CHNs from Wadeye – spoke about their 'Feeding Kids' program

COMMUNIQUE¹ IN QUALITY

THROUGHOUT COMMUNIQUE

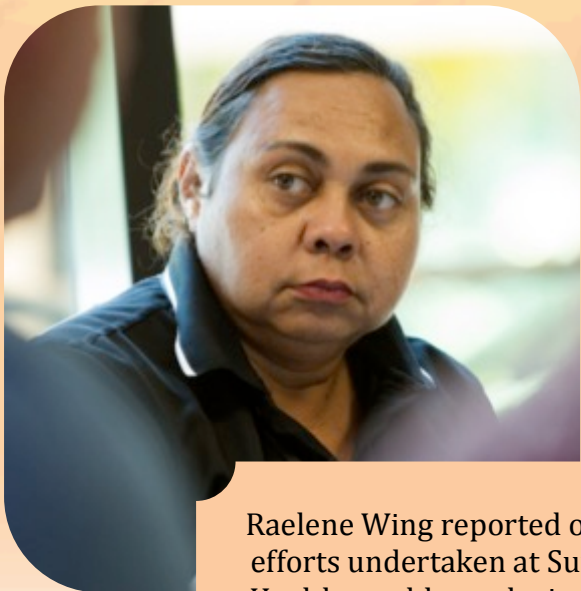
Table top photos with words



Nikki Percival spoke on the potential of CQI to improve childhood anaemia



Felicity Marwick spoke on childhood anaemia data from Maningrida



Raelene Wing reported on the efforts undertaken at Sunrise Health to address the issue of childhood anaemia



Marie Elrington from Canteen Creek spoke of her team's success in dealing with the issue of childhood anaemia