

Red Dirt, Crocs and a Commitment to Quality



DIRINTANGKU MIYRTA



ONE SHIELD FOR ALL





OBJECTIVE

STRATEGY



COLLABORATION

Action Plan

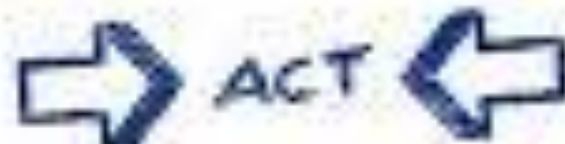


IMPLEMENTATION

CHECK ☒
IMPROVEMENT ☒



SCHEDULE



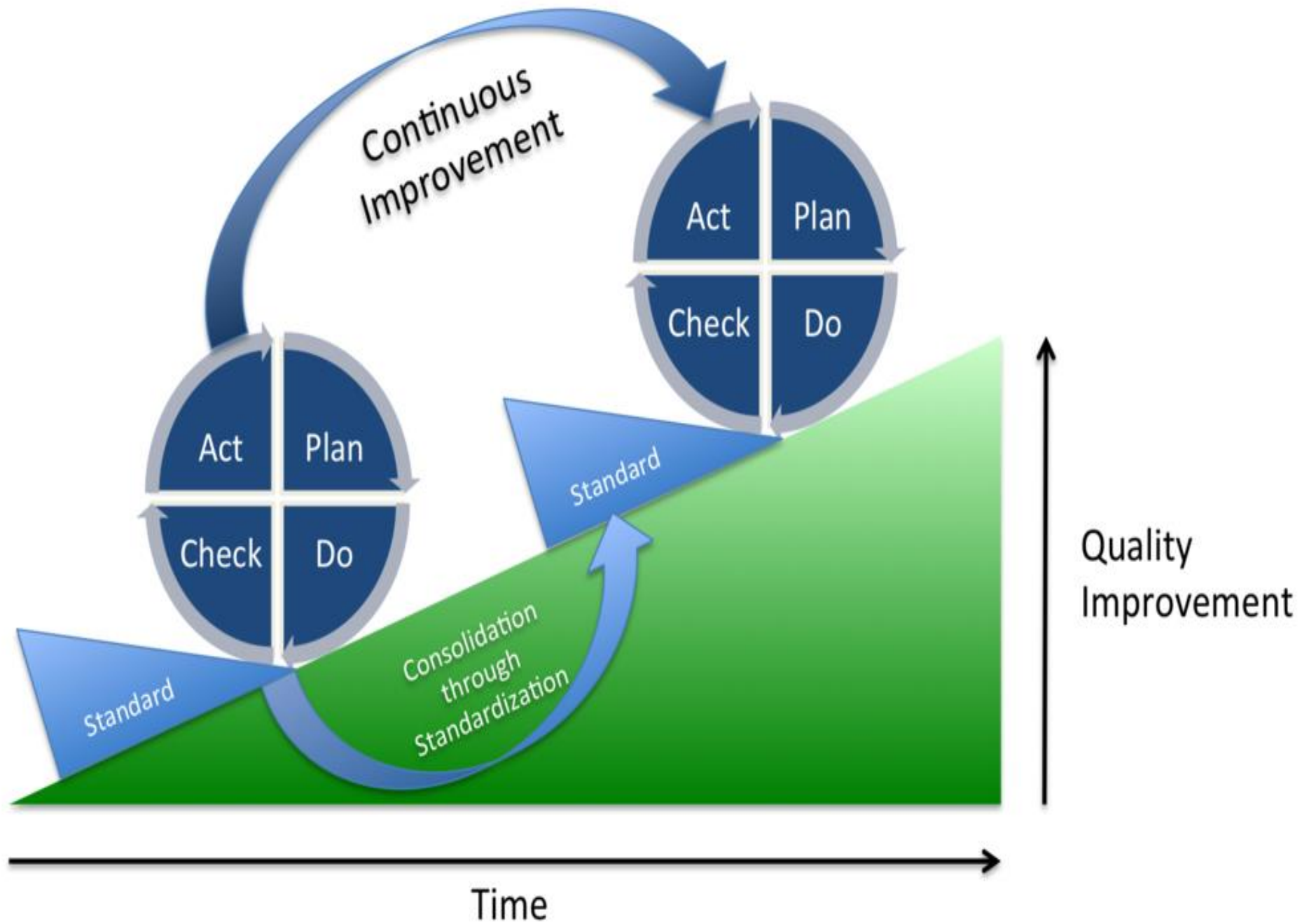
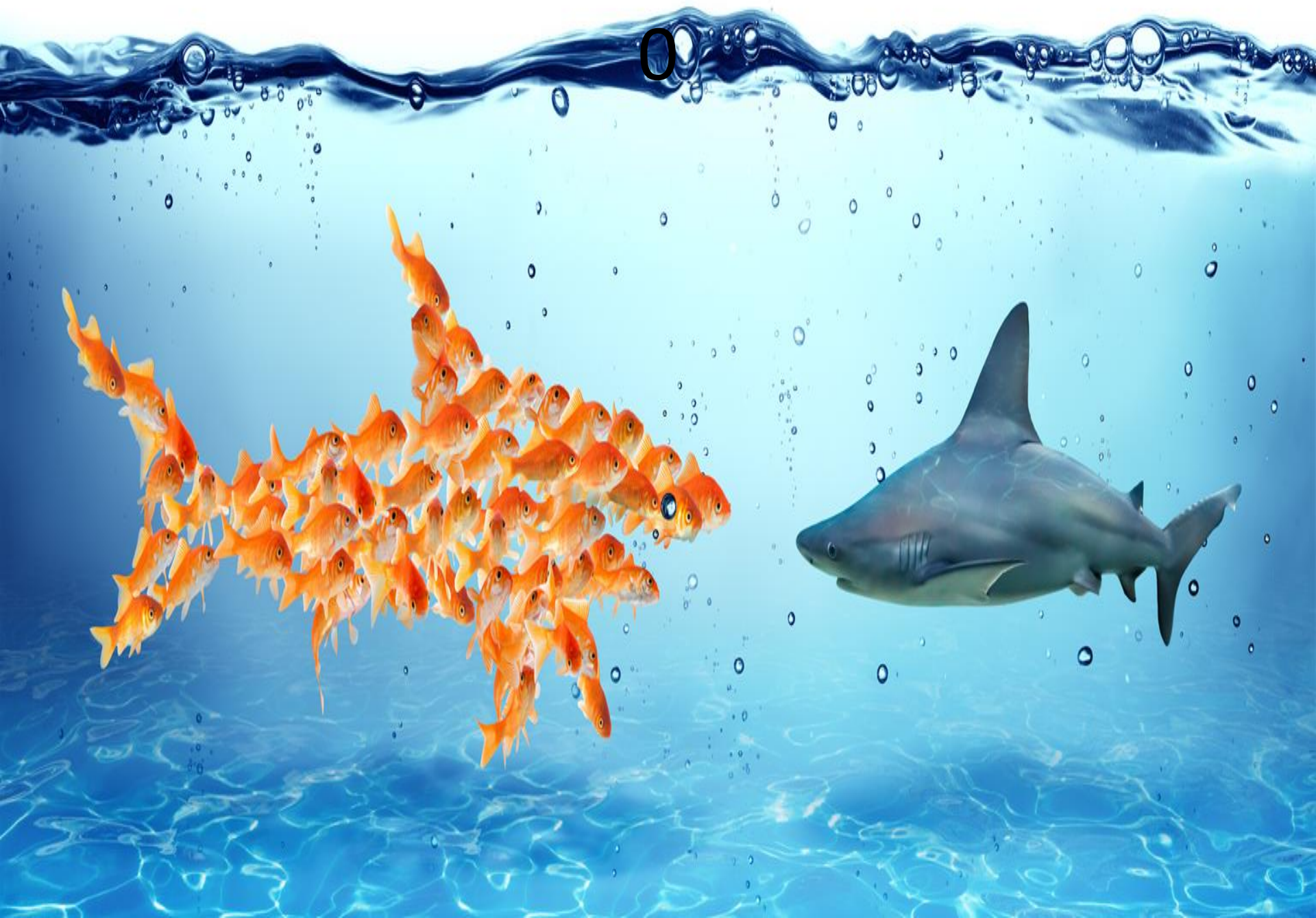
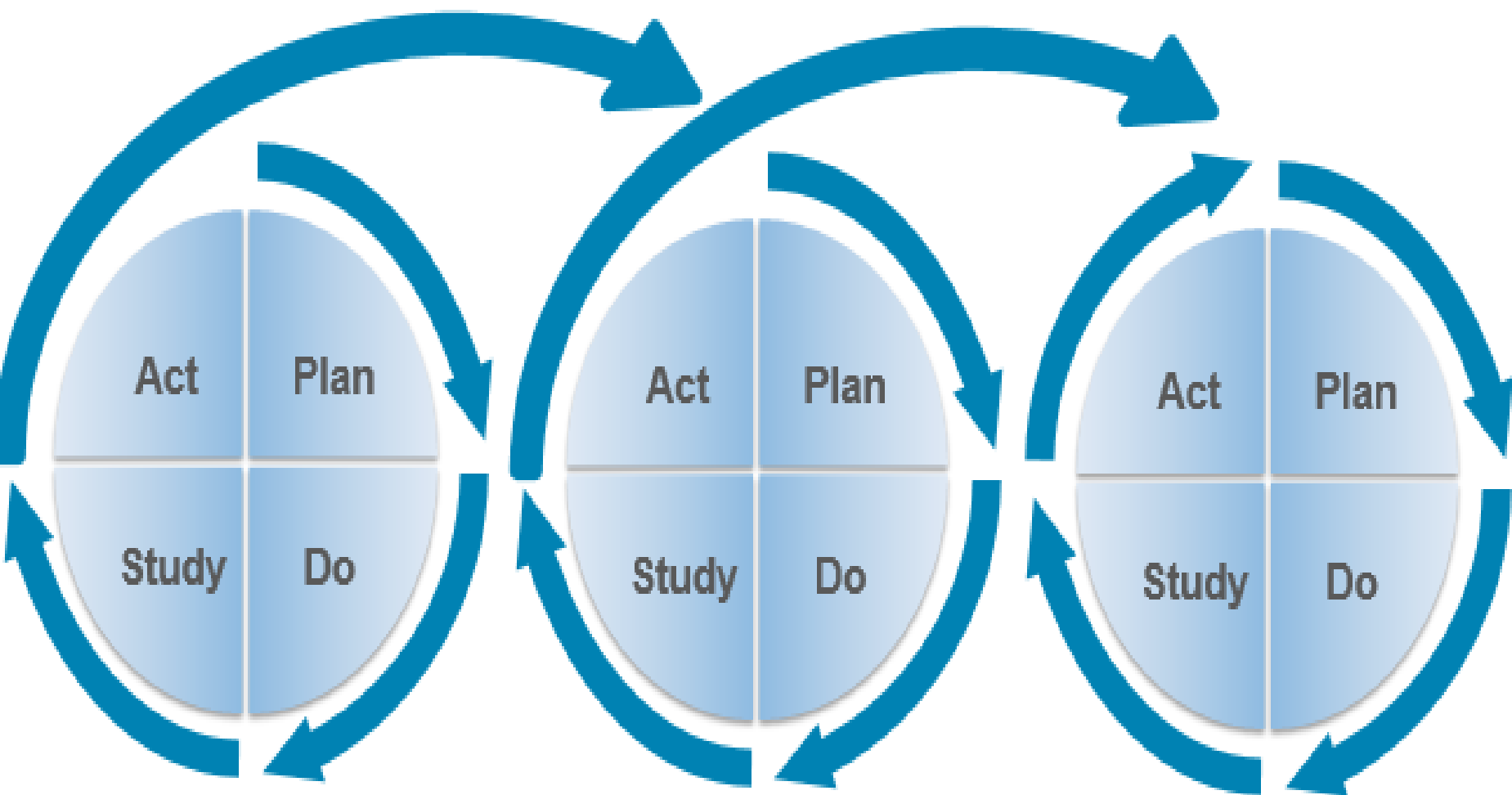




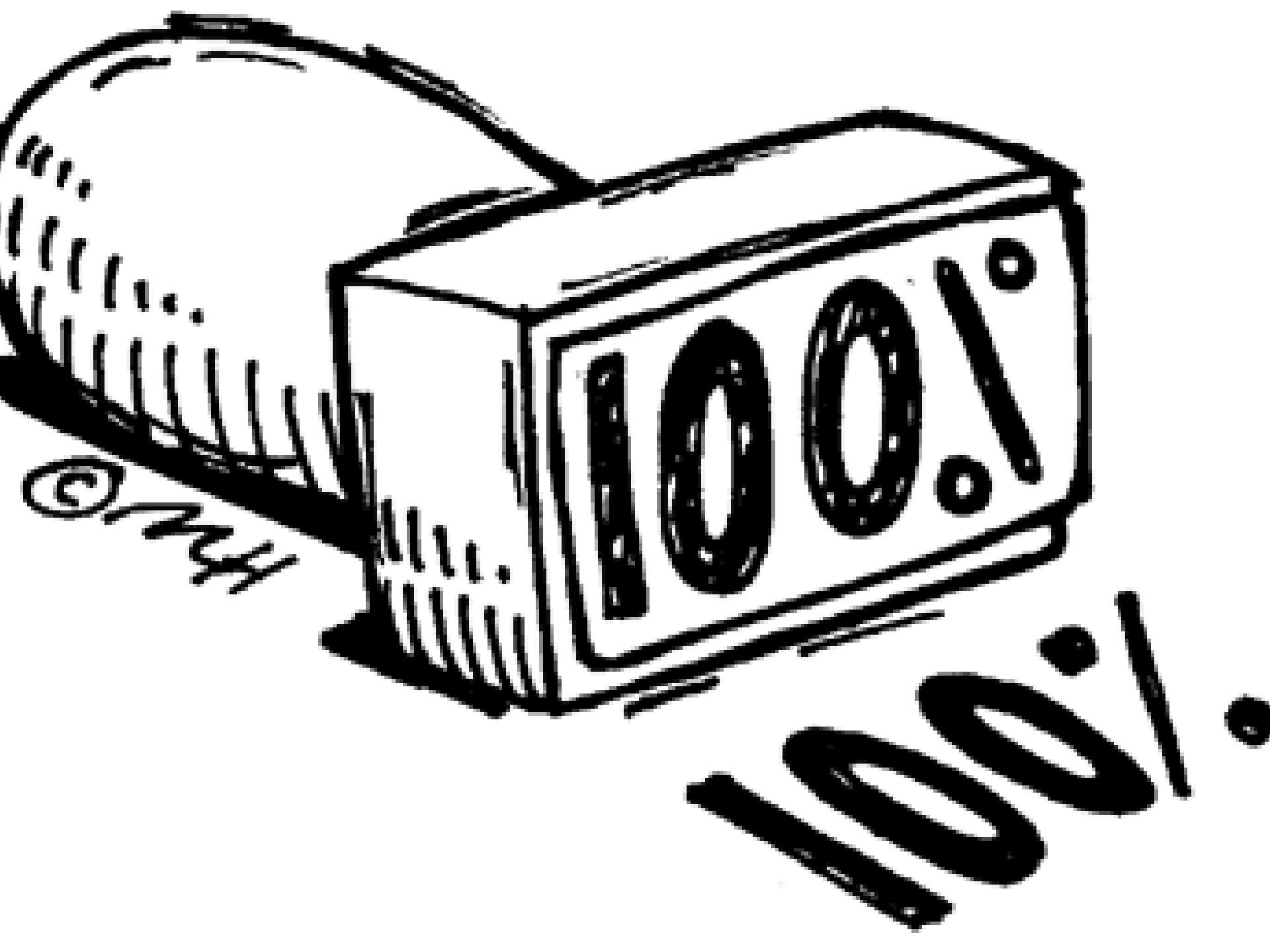


Figure 1: Cultural security as series of nested domains











Accredited by



Section 1 Essential Checklist

	Yes	No	NA	Action
Criteria- all audited over the last 2 calendar months				
1.1 Daily essential checklist completed	X			
1.2 Weekly essential checklist completed	X			
1.3 Essential checklists easily accessible and available to all staff	X			
1.4 Emergency trolley checks completed	X			
1.5 Review top draw of Emergency trolley and check against checklist	X			
1.6 Emergency pack checks completed	X			
1.7 Review emergency pack against checklist	X			
1.8 Emergency drug checks completed	X			
1.9 Review emergency drugs against checklist	X			
1.10 Health Centre Cleaning checklist available and completed as per schedule.	X			
1.11 All quality essential checklists uploaded to the intranet and available	X			
1.12 Australian Charter of health care rights is displayed in the health centre	X			
Total				
Comments				

Section 2 Pharmacy

Criteria				
2.1 Pharmacy door closed with keypad lock	X			
2.2 Random sample of two drugs per shelf in date	X			
2.3 DD key in locked keypad behind locked pharmacy door	X			
2.4 DD checked and balanced weekly	X			
2.5 Appendix K sedation stickers available	X			
2.6 Non vaccine drug fridge monitored daily	X			

Section 1 Hand Hygiene








	Yes	No	NA	Action
Criteria				
1.1 KWHB has comprehensive procedures and a policy for Hand Hygiene	X			
1.2 KWHB structures are in place to ensure, distribution, compliance and monitoring of the hand hygiene policy and procedures	X			
1.3 Hand hygiene is a part of orientation for all staff	X			
1.4 Staff have received training in hand hygiene procedures.	X			
1.5 Clinical staff nails are short, clean and free from nail extensions and varnish	X			
1.6 No wrist watches, stoned rings or other wrist jewellery are worn during clinical procedures	X			
1.7 Hand hygiene is encouraged and alcohol hand rubs are made available for visitors	X			
1.8 There is a hand wash basin in each treatment/ clinical area	X			
1.9 10 Hand washing facilities are clean and intact (check sinks taps, splash backs, soap and towel dispensers)	X			
1.10 There is easy access to the hand wash basin	X			
1.11 Liquid soap is available at each hand wash basin	X			
1.12 There is no bar soap at hand washing basins in treatment/clinical areas	X			
1.13 Alcohol hand rub is available at the point of care	X			
1.14 Portable alcohol hand rub is available for home visits	X			
1.15 Clinical staff have access to hand moisturisers that are pump operated	X			
1.16 Soft absorbent paper towels are available at all hand wash sinks	X			
1.17 There are no re-usable cotton towels used to dry hands	X			
1.18 There are no re-usable nailbrushes used or present at hand wash sinks	X			
1.19 There is a foot operated bin for waste towels in close proximity to hand wash sinks which are fully operational	X			



One21seventy

National Centre for Quality Improvement
in Indigenous Primary Health Care

ABCD One21seventy
Admissions
Alcohol Treatment Project
AOD
APCC
Audit Logs
Clinic Activity
Clinical Record
Conditions
Database Consistency
Documents
Electronic Claims
Encounter Analysis
Flinders CTG
GAA
Headspace
Health Care Providers
Healthy for Life
Immunisations
Investigations
ITC
JHU
KWHB



Data Entry Wizard

Clinical Record

Browse MIMS Drug Data

Patient Summary











Patient Labels

Documents and Results

Transport Services

You are registered for 62 licences and are currently using 468.

Administration - no client contact) (No program selected)

- AHC01...
- Child 01...
- Child 02...
- Child 03...
- Child 04 Anaemia...
- Chronic01...
- Chronic02...
- Fully Immunised Children...
- Maternal 01 Hb...
- Smoking...

KWHBCA

MECSH

Medications

MeHR

Menzies

National KPI

NT KPI

ONDAS

Optometry

OSR

Patients

Performance Indicators

PHN

Population

Population Analysis

Power BI Exports

Pregnancy

Private Billing

Procedures

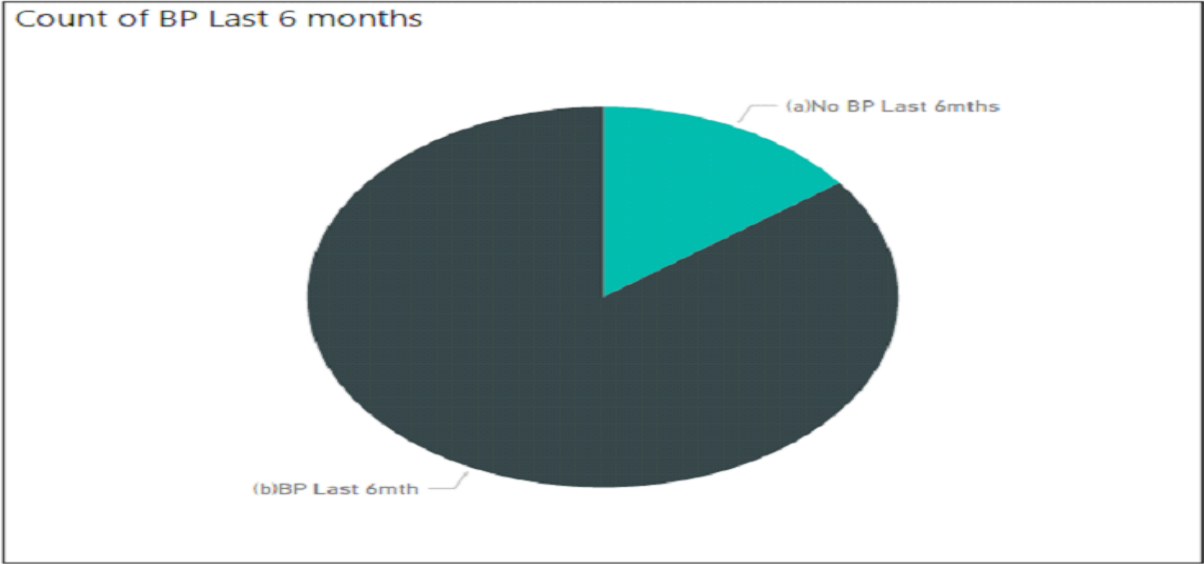
Qualifiers

Results

Table 3b: Proportion and number of T2D clients by record of scheduled services delivered within designated timeframes

Audit Date	BP (within last 6 months) diabetic clients who attended in the last 6 months	BP (within last 6 to 12 months) diabetic clients who attended in the last 12 months	Weight (within last 6 months) diabetic clients who attended in the last 6 months	Waist circumference (within last 6 months) diabetic clients who attended in the last 6 months	BMI (within last 6 months) diabetic clients who attended in the last 6 months
31/12/2016	104/122	104/122	96/122	59/122	69/122
Audit Sample size 122	85%	85%	79%	48%	57%

Figure 3c: Blood pressure count in last 6 month previous to 01/06/18, as determined from BP systolic and Diastolic qualifies in this time frame:



Raw data BP last 6 months:

BP6 1	Count of BP6 1
(a)No BP Last 6mths	18
(b)BP Last 6mth	104
Total	122







**ONE DAY, CQI WILL COME TO AN
END...**

BUT NOT TODAY