



Quality Improvement Framework 2023

ORGANISATIONAL INDICATORS

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Version Control

Version	Amended By	Date	
1.0	Clare Fitton	08.09.2022	Created
2.0	Magdalena Clayton	22.09.22	Corrections
3.0	Clare Fitton	22.09.2022	Expansion of wording in ORG23-004 and formatting of document
4.0	Clare Fitton	13.10.2022	Revision of indicator ORG23-002 and inclusion of indicator ORG23-005
5.0	Clare Fitton	14.10.2022	Removal of ORG23-003, reorganisation of indicator allocations, revision of indicator ORG23-001 to incorporate a mid-year review, revision of ORG23-002 to include benchmark
6.0	Clare Fitton	17.11.2022	Revision of ORG23-002, rewording of ORG23-003 and revision of ORG23-004
7.0	Nicole Hough	21.11.2022	Revision of ORG23-002
8.0	CF, NH, SS	05.12.2022	Removal of Patient Satisfaction measure and reinstatement of adapted complaints measure

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ORG23-001 Cancer Diagnoses – 8 points

The practice must review all newly diagnosed cancer patients, reflecting on the patient journey, to include:

1. the cancer diagnosis and patient demographic (age, gender, ethnicity)
2. the presenting symptoms
3. the date of the initial consultation
4. the number of GP consultations prior to referral/diagnosis
5. what worked well?
6. what could be improved?
7. challenges faced?
8. lessons learned?

And should consider:

- the ease of making the referral
- whether the referral was received and acted upon in a timely manner (i.e; where a referral was marked urgent, it was triaged as urgent)
- whether the referring GP was kept up to date with regular communication from secondary care
- the patient experience wherever possible.

Reviews should be considered during regular practice meetings, to be held at least quarterly. These reflections are to be presented in a formal report to the Primary Care Governance Team. PCGT will undertake a mid-year review in July 2023 – the practice will be required to submit a preliminary report on activity and findings to date which will inform the end of year report.

Evidence

Practice preliminary report submitted to PCGT by 30 June 2023.

Final report submitted to PCGT by 31 December 2023. This final report must include points 1 to 8 as set out above as well as redacted minutes of all review meetings conducted.

Fail/Partially Achieve/Achieve

The practice will receive 100% of the allocated funding on submission of both reports which captures the information above and is evidenced by the inclusion of redacted minutes, that regular reviews have been undertaken. The report should also incorporate an action plan of improvements to take forward in to 2024.

Where a practice has failed to meet all of the requirements, PCGT may, at their discretion, award reduced funding. Failure to submit a report deemed satisfactory by PCGT will result in zero funding.

For 2024, this indicator will continue but will, in addition, consider the changes implemented within the practice in response to the findings of the review in 2023. This will be assessed in the period 01 January to 30 June 2024 and achievement will account for 50% of the funding.

ORG23-002 Complaints – 5 points

The practice is required to have a complaints policy which commits to service standards on time frames for addressing complaints and gives information regarding the role of the Primary Care Governance Team. The practice is required to document any complaint made to the practice and ensure that a sample are reviewed at regular practice meetings. The practice must present an annual report to the Primary Care Governance Team as soon as possible after 31 December on all complaints received. This should include:

1. number of complaints recorded
2. the date on which each complaint was received, acknowledged and closed
3. the proportion addressed within the complaints policy timeframe
4. nature of the complaints (clinical care, attitude/behaviour/cost etc)
5. trends, themes or patterns identified
6. redacted minutes of practice meetings regarding complaints
7. lessons learned
8. actions taken

PCGT will collate the information presented by the practice, alongside that of all other practices and PCGT, and present a combined Annual Complaints Report by the end of Quarter One 2024.

During Quarter One of 2023, the practice will be required to provide PCGT with copies of all information available to patients, confirming how this information is accessed by patients along with a copy of the current practice complaints policy. This might include links to websites, patient leaflets etc.

Evidence

The practice will submit to PCGT during Quarter One of 2023 copies of all information available to patients.

The practice will submit a report to PCGT as soon after 31 December 2023 as possible, and before Friday 12 January 2024. This report must include, as a minimum, points 1 to 8 above. Further detail may be included regarding challenges faced, such as delays in receiving information or responses.

Fail/Partially Achieve/Achieve

Where a practice has failed to meet the requirements, PCGT may, at their discretion, award reduced funding. Failure to submit a report deemed satisfactory by PCGT will result in zero funding.

ORG23-003 Audit Programme – 4 points

The practice will be required to identify a minimum of three areas to audit during 2023. These will be identified as areas for potential improvement within the practice. In the first instance, PCGT will provide each practice with a minimum of one prescribing element to consider as part of the audit programme. This will be provided during December 2022. The practice has the opportunity to present alternatives to this if other areas are identified. The proposed audit programme for the practice should be submitted to PCGT by 31 January 2023.

PCGT will review the proposals and respond by no later than 17 February 2023.

Audits must be undertaken at least quarterly and the findings reviewed as a practice, developing an action plan for each area requiring improvement. This should be presented to PCGT in a report on each audit area at the end of the year.

Evidence

The submission of the proposed audit programme to PCGT by 31 January 2023.

Quarterly audit and reviews undertaken and recorded throughout the year.

Final report detailing the audits undertaken, the findings and any actions taken or to be implemented submitted to PCGT by 31 December 2023.

Fail/Achieve

The practice will receive 100% of the allocated funding on submission of a complete audit report by 31 December 2023. Failure to submit a satisfactory report will result in zero funding.

ORG23-004 Data Cleansing – 8 points

The practice will be required to undertake a data cleansing exercise involving the completion of a review of all duplicate patients (data for this exercise to be provided by PCGT), confirming which is the patients primary practice and ensuring the patient record in any other practice is made secondary.

This issue has been addressed previously, but compounded recently by the EMIS decision to switch off the MPI function. Completion of the data cleansing will mitigate against any future issues.

Evidence

PCGT will provide the practice with an EMIS report detailing the duplicate patients aligned to the practice during Q1 of 2023.

PCGT will request EMIS to re-run the duplicate patient's data on a quarterly basis, providing the practice with an updated list by the end of each quarter subsequently.

At 31 December 2023, should there remain any patients with more than one primary record, all practices involved will be required to report on why those patients remain by 13 January 2024.

Fail/Achieve

The practice will receive 100% of the allocated funding upon completion of the data cleansing.