

APCC Introduces Patient input for the first time in Australia

For the first time in Australia, the Improvement Foundation (IF) has introduced patient involvement to their biggest Program, the Australian Primary Care Collaboratives (APCC).

In June 2009, IF announced the introduction of two new topics to the APCC Program, Chronic Obstructive Pulmonary Disease (COPD) and Chronic Disease Prevention and Self Management (CDPSM).

The first COPD & CDPSM workshop was held in October at Brisbane. 21 patient representatives, three carers and 91 practices attended from a variety of Divisions across Australia. Patient involvement adds another dynamic to the Program and workshops in particular, where practices and Divisions have the opportunity to gauge patient perspectives on various aspects of their systems and processes.

Recruitment

Divisions were responsible for recruiting patients who would be both valuable and constructive. Participating practices were asked to recommend suitable patients who would be willing and able to volunteer their time to attend each of the three workshops.

At Central Highlands Division of General Practice, Collaboratives Program Manager, Catherine Ferreira took a novel approach to patient recruitment by inviting patients to formally apply for the role as patient participant. She drew up a flyer outlining the details of the role and, through the practices participating in the wave, requested any interested patients send a resume and covering letter, addressing the patient criteria.

“From the three applications, Anita really stood out as being very articulate, her CV was very impressive, she’s been involved in lots of activities, both health and community wise, so we thought she would be a great asset to the Division team.” Catherine says of her Division’s patient representative.

At the workshops

After the first learning workshop, practices were able to apply the patient feedback and suggestions into their own progress within the Program. Coliban Medical Centre took on board Anita’s suggestions for creating a successful survey. From the patient perspective, Anita highlighted that people are reluctant to complete surveys that are too long or detailed. She suggested that any surveys should be a tick box or scale answer with only a section at the end for further comments. This will encourage more people to fill the survey in as it is not as time consuming for a patient.

Patients involved in the Program attend each workshop like other delegates, including the plenary, breakout sessions and team time. While they are able to gain insightful information that can assist them in their own self management during the breakout sessions, it is the team time that brings the most patient value to the practices. During team time patients and practice staff have the opportunity to discuss the Program freely, make suggestions and recommendations to one another.

During one team time, the topic of spirometry was being discussed. Here, Anita said how hard it is for someone with COPD to do a spirometry and that if you’re asked to repeat it, that’s a huge effort on behalf of the patient. The practice staff had not thought of this before and now before doing a

spirometry, they bear in mind the difficulty and discomfort for the patient and try to make sure it's done properly the first time around, so as not to have to repeat the test.

While the involvement of patients in the APCC Program aims to benefit the Program and the practices by giving them another perspective when making improvements, many of the patients have also benefited personally through their involvement.

Melbourne General Practice Network patient representatives Veronica and Julie have gained valuable insight towards their own diabetes self management. From a patient's perspective Julie believes "this Program is particularly important. If it's true that there will be double the amount of people suffering from Diabetes in the next ten years, this is great for them."

Involving patients in the APCC Program allows practices to look at their responsibility towards patient care differently, by having the ability to discuss ideas with patient representatives, particularly those who suffer from a chronic disease and need constant and ongoing care. Melbourne GP, Fiona Broderick says the patient involvement "really added another dimension to improving patient care. Seeing patients outside of the practice and hearing their ideas on patient management and feedback has been excellent and really interesting."

| Learning workshop three of the COPD & CDPSM wave will be held on 21 & 22 May 2010.