

**Breed St Clinic** is a large rural practice in Taralgon, South-East Victoria. The practice services a patient population of around 14,500 with 6 full-time GPs, 4 practice nurses, a practice nurse coordinator, a practice manager and associated administrative staff.

"Prior to joining the APCC Program, the practice recognised the value of quality improvement, and strived to ensure all our patients were receiving the best care, but we felt there was still room to improve, particularly in the care of our patients with diabetes.

**What we needed was a framework to progress the practice into a more structured and coordinated approach.**

We identified the APCC Program as an opportunity to help us develop a more systematic approach for patients with chronic conditions, develop team focussed care, and easily monitor our progress, as we worked to further enhance the good work already being undertaken by the practice.

As a larger practice, our change wasn't as fast as the smaller practices that participated in the Program, but it was well worth the effort. By applying the quality improvement methods we learnt through the Program, we are delivering better coordinated care through a stronger 'practice team approach', and we have achieved excellent improvements in the delivery of care to our patients with coronary heart disease and diabetes.

**The Program provided our practice with the focus, motivation and structure to implement changes and ultimately improve patient outcomes."**

Dr PAUL BROGHAM, LEAD GP  
BREED STREET CLINIC, VIC

**Daisy Hill Medical Centre** is located in an urban area of Queensland and after 30 years of operation we are now seeing third generation children. With approximately 13,000 patients on our books, our 7 GPs (4 FTE) are supported by 2 part-time practice managers and a part-time practice nurse.

**"Before we joined the Program our GPs were working increasingly long hours, patients faced lengthy waits to see their GP, and the practice staff were stressed and working long hours.**

We recognised that a new approach was needed. So, with the goal of improving the quality of patient care and improving the quality of working life for our GPs and staff, our practice joined the APCC Program.

Through applying the methods of quality improvement we learned at the Program workshops we have seen a more pro-active delivery of care to patients with coronary heart disease and diabetes, and our practice is running more efficiently.

**Our patients are more satisfied with their ability to access their GP, and our GPs are, perhaps for the first time in years, able to routinely have a lunch break!"**

Dr NICK STEPHENS  
DAISY HILL MEDICAL CENTRE, QLD

## **Murgon Family Medical Practice**

is situated in rural Southern Queensland with a patient population of around 9,000 serviced by 3 GPs, 1 registrar, and 3 part-time practice nurses.

"Prior to joining the APCC Program our practice was struggling to meet patient demand, our registers and recall systems were out of date, and few SIP claims were made, despite the work being completed and referrals initiated.

**Practice management decided there must be a better way of dealing with our patient information management. Something had to happen. It did - our practice joined the APCC Program.**

Through our application of the Improvement Model we now have our registers and recall systems functioning effectively, our diabetes and coronary heart disease patients are experiencing better long term health outcomes, and practice income has increased, due to improved practice efficiency and SIP claims reflecting work carried out by the team.

**We cannot speak highly enough of the APCC Program. Our doctors' time is now used more effectively, income is optimised, and we are now working with a smooth operating system that is accurate and efficient."**

Dr GRAHAME McALLISTER  
MURGON FAMILY MEDICAL PRACTICE, QLD

**Rosedale Medical Practice** is located in the north-western suburbs of Sydney. 4 part-time GPs, 5 part-time reception staff, a full-time practice manager and a part-time practice nurse serve a patient population of approximately 5,000.

**“We wanted to adopt a more systematic and proactive approach to managing our patients’ health care, but we didn’t know where to start, or how we could manage it within our already busy practice environment. Then we discovered the APCC Program.**

Using the Program’s Improvement Model we identified our goals, and through a series of small stepped plans, we implemented our systems change. Simple systems were created to improve the integrity of our diabetes register and the management of our patients with diabetes. Over the course of just a few months, through the practice feedback graphs provided by the Program, we could see the progress our team was making.

The additional income to the practice through completing the Diabetes Annual Cycle of Care and in claiming the Diabetes SIP payment, was an unforeseen bonus, but most important is that the entire team at the practice were active participants in the decisions made about change.

**Our practice will continue using the Collaboratives methodology to provide a proactive, consistent, and coordinated approach to patient care and business efficiency.”**

Dr ELIZABETH PRATT  
ROSEDALE MEDICAL PRACTICE, NSW

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**if** the APCC Program worked so well for these practices, imagine how it can help yours.

