



THANK YOU!

...to all the participants who contributed their knowledge and experience to this project

# CQI SUCCESS STORIES

## Background

Stories about the most significant changes that have occurred in health centres were collected from eight health centre staff members and five CQI (Continuous Quality Improvement) facilitators/ coordinators from services who are participating in the ABCD National Research Partnership. The reported stories and their relevance and value were discussed in depth during a workshop attended by 35 participants at the Lowitja Institute National Conference on CQI in Aboriginal and Torres Strait Islander Primary Health Care in 2012.

## Key Findings

### Is there one strategy that was found to be effective?

Each organisation used multiple strategies. Those organisations which are more experienced with CQI tended to utilise more advanced strategies and have sufficient systems in place to organise other strategies.

### Were the strategies in different services similar?

Each health centre used different combinations of strategies with selection of strategies dependent on gaps identified in the audit process, organisational priorities and locally identified challenges.

*"...they developed, what they call a collaborative group... because all the clinics or health centres are far away from each other... quarantine that time for the clinician, that they could close the clinic. With web conferencing software, and things... to bring the meeting alive a little bit, so people could see each other. That was kind of based on using the tools of ABCD..., to bring the information..., so to do the audit itself..., to identify where the gaps were..., but to use this forum for the more short cycle CQI stuff" - Public Health Consultant*

### How did services decide which strategies to use?

All organisations used audit tools, systems assessment process and PDSA cycles to identify gaps and then implement strategies specific to the identified gaps.

*"It needs to be in everyone's job description, it needs to be on the agenda at every staff meeting, it needs to be really part of the whole way that the service works, that they are an ongoing continuous improvement organisation. And you need to have involvement of the staff and being able to interpret data and set their goals and it has to be done at that local level and not from outside, not from the head office" - Service Manager*





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## *Key Findings - continued*

### **Does the choice of strategies change with the stage of CQI in the service?**

Most reported that in the first CQI cycle common gaps were lack of internal systems e.g. clinical record keeping systems and/or poor condition of data base. Implementation of strategies at this stage usually resulted in large improvements in documentation practices and setting up of systems. In subsequent cycles the organisation's orientation changed and strategies became more refined with the focus changing from internal processes to concentrating on changes outside the organisation. The organisation's experience appears to grow with each cycle and the strategies become more advanced.

### **What is needed to embed CQI in routine practice?**

Once QI becomes routine behaviour it is more likely to be sustainable and successful.

To be sustainable the organisation needs:

- effective organisational systems
- each staff member to recognise that quality improvement is part of routine practice
- management support
- availability of tools and time
- staff to be trained and clearly understand CQI procedures

*"...the main contributing thing to the success of CQI is the leadership and management within the organisation" - CQI Facilitator*

*"I took the rest of the team through the audit tool, talked about why we did it and got them to do some dummy audits because then I think most of the team then had the light bulb moment as well with gee this is good... this will highlight our successes and it will highlight our gaps. And therefore identifying our gaps we could then discuss our plan of how we were going to change our practice and what we need to put in place to cover those gaps really"*  
- CQI Facilitator

## **Conclusion**

Continuously identifying gaps and finding appropriate means to make improvements is more important than the content of the strategies used. Strategies are specific to the context.

## **Next steps**

Building on this project the ABCD National Research Partnership is undertaking a broader study to identify and explore effective strategies in the implementation of CQI in Aboriginal and Torres Strait Islander PHC centres. The outcomes of this project will be disseminated widely. If you are interested in participating in this next study please contact [jo.newham@unisa.edu.au](mailto:jo.newham@unisa.edu.au).

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