Practice Incentives Program Quality Improvement (PIP QI), 2020

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Practice Incentives Program Quality Improvement (PIP QI), 2020

Identifying and definitional attributes

Metadata item type: Indicator Set

Indicator set type: Other

METEOR identifier: 729603

Registration status: Health, Recorded 05/01/2021

Description: Background

The Practice Incentives Program Quality Improvement (PIP QI) Incentive program commenced in August 2019. It aims to recognise and support general practices' commitment to improving the care they provide to their clients. Participating practices will be supported to utilise the clinical information they have about their own communities and their knowledge of the particular needs of their own clients to develop innovative strategies to drive improvement.

As well as undertaking quality improvement activities, practices share a set of deidentified aggregated data on 10 Quality Improvement Measures (QIMs) with their local Primary Health Network (PHN) as defined in a data sharing agreement. This information will be collated by the Primary Health Networks (the Regional Data Custodian) to assist in supporting improvement and understanding population health needs. PHNs also share the aggregated data on 10 QIM with the National Data Custodian - the Australian Institute of Health and Welfare (AIHW) as defined in the Practice Incentive Program (PIP) Eligible Data Set Data Governance Framework (Department of Health 2020).

The AIHW has been appointed as the National Data Custodian of 10 QIMs and is responsible for managing the use, access and protection of data in the collated national data set. As a part of that role, AIHW has developed the metadata, data set specifications and indicator specifications for these measures using relevant components of the Indigenous Primary Health Care National Best Endeavours Data Set (IPHC NBEDS). It is envisaged that once implemented, metadata standards would enhance the value and consistency of the aggregate data on the 10 QIMs extracted from general practice clinical information systems contributing to the regional and national level analysis and research.

PIP QI Incentive

The PIP QI Incentive is a payment to general practices for activities that support continuous quality improvement in patient outcomes and the delivery of best practice care. General practices enrolled in the PIPQI Incentive commit to implementing continuous quality improvement activities that support them in their role of managing their clients' health. They also commit to submitting nationally consistent, de-identified general practice data, against 10 QIMs that contribute to local, regional and national health outcomes. The improvement measures allow general practices to understand which clients may benefit from preventative treatments, or may need recall to ensure effective management of a specified chronic disease (e.g. diabetes). This can help delay progression of the condition, improve quality of life, increase life expectancy, and decrease the need for high cost interventions.

Quality Improvement Measures

The collection of de-identified aggregate data on 10 QIMs are part of a system of quality improvement that includes reflective practice, a common data baseline, and data analysis. QIMs are not designed to assess individual general practices or general practitioner performance. Their purpose is to support a regional and national understanding of chronic disease management in areas of high need, and future iterations will provide emerging evidence on areas of high need. The Practice Incentives Program Eligible Data Set NBEDS 2020-21 describes the measures in detail.

Relational attributes

Indicators linked to this Indicator set:

Practice Incentives Program Quality Improvement: 01 Proportion of regular clients with diabetes with a current HbA1c result, 2020

Health, Recorded 05/01/2021

Practice Incentives Program Quality Improvement: 02a Proportion of regular clients whose tobacco smoking status has been recorded, 2020

Health, Recorded 05/01/2021

Practice Incentives Program Quality Improvement: 02b Proportion of regular clients with a tobacco smoking status result, 2020

Health, Recorded 05/01/2021

Practice Incentives Program Quality Improvement: 03a Proportion of regular clients with a weight classification recorded, 2020

Health, Recorded 05/01/2021

Practice Incentives Program Quality Improvement: 03b Proportion of regular clients with a weight classification, 2020

Health, Recorded 05/01/2021

Practice Incentives Program Quality Improvement: 04 Proportion of regular clients aged 65 and over who were immunised against influenza, 2020

Health, Recorded 05/01/2021

Practice Incentives Program Quality Improvement: 05 Proportion of regular clients with diabetes who were immunised against influenza, 2020

Health, Recorded 05/01/2021

Practice Incentives Program Quality Improvement: 06 Proportion of regular clients with COPD who were immunised against influenza, 2020

Health, Recorded 05/01/2021

Practice Incentives Program Quality Improvement: 07 Proportion of regular clients with an alcohol consumption status, 2020

Health, Recorded 05/01/2021

Practice Incentives Program Quality Improvement: 08 Proportion of regular clients with the necessary risk factors assessed to enable CVD assessment, 2020

Health, Recorded 05/01/2021

Practice Incentives Program Quality Improvement: 09 Proportion of female regular clients with an up-to-date cervical screening, 2020

Health, Recorded 05/01/2021

Practice Incentives Program Quality Improvement: 10 Proportion of regular clients with diabetes with a blood pressure result, 2020

Health, Recorded 05/01/2021

Collection and usage attributes

National reporting arrangement:	Data submission period	Data provision reference period for PHN supply to AIHW	Due date of data submission by PHN to AIHW
	1 August to 15 October	1 July to 30 September	By 31 October
	1 November to 15 January	1 October to 31 December	By 31 January
	1 February to 15 April	1 January to 31 March	By 30 April
	1 May to 15 July	1 April to 30 June	By 31 July

Implementation start date: 30/10/2020

Comments:

The PIP QI program started on 1 August 2019. It consists of a payment to general practices that participate in quality improvement activities to improve patient outcomes and deliver best practice care.

There are two components a general practice needs to meet to qualify for a PIP QI incentive payment:

1. Participate in continuous quality improvement

The PIP QI incentive rewards practices for participating in continuous quality improvement activities in partnership with their local PHN. Practices may focus their quality improvement activities on specified improvement measures. There are no set targets for the improvement measures. Alternatively, practices can choose to focus their activities on other areas. These areas must be informed by their clinical information system data and meet the needs of their practice population.

2. Provide the PIP eligible data set to their local PHN.

The PIP Eligible Data Set is the data collected against specified Improvement Measures. General practices must submit to their local PHN on a quarterly basis the PIP Eligible Data Set from their general practice clinical information system. PHNs will use the de-identified data to provide feedback to general practices. This will help the practices identify key priority areas and quality improvement activities.

Source and reference attributes

Submitting organisation: The AIHW is the national custodian of the de-identified aggregate data on the

10 QIMs. In order to maximise the quality and consistency of all information collected and reported. AlHW's Primary Health Care Data Unit (PHCDU) developed the metadata, data set specifications and indicator specifications for these measures in collaboration with AlHW's Metadata and METeOR Unit, using

relevant components of the IPHC NBEDS.

Steward: Australian Institute of Health and Welfare

Origin: Department of Health 2020a. PIP QI Incentive Guidance. Department of Health,

Canberra. Viewed 29 May 2020, https://www1.health.gov.au/internet/main

/publishing.nsf/Content/PIP-QI Incentive guidance

Reference documents:

Department of Health 2019. Practice Incentives Program Eligible Data Set Data Governance Framework. Department of Health, Canberra. Viewed 29 May 2020,

https://www1.health.gov.au/internet/main/publishing.nsf/Content/

46506AF50A4824B6CA25848600113FFF/\$File/Practice%20Incentives

%20Program%20Eligible%20Data%20Set%20Data

%20Governance%20Framework.pdf

Department of Health 2020b. PIP QI Improvement Measures: Technical Specifications. V. 1.1. Department of Health, Canberra. Viewed 29 May 2020,

https://www1.health.gov.au/internet/main/publishing.nsf/Content/46506AF50A4824B6CA25848600113FFF/\$File

/PIP-QI-Technical-Specifications.pdf

Department of Health 2020c. Practice Incentives Program Quality User Guide.

Department of Health, Canberra. Viewed 22 June 2020,

https://www1.health.gov.au/internet/main/publishing.nsf/Content/46506AF50A4824B6CA25848600113FFF/\$File/PIP%20QI%20-%20

User%20Guide.pdf