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National Quality and Performance System for Divisions of
General Practice:
Early Reflections on a System under Development.

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Performance Management Systems

- 4 Assurance systems use summative mechanisms to achieve accountability
- 4 Internal systems use formative mechanisms to achieve continuous quality improvement (Freeman 02)
 - Both use measurement, benchmarking
 - Different philosophical bases
 - Use data in different ways to promote behaviour change
- 4 Evidence of effectiveness scant and assurance systems associated with unintended consequences
- 4 NQPS aims to achieve accountability and stimulate quality improvement

Background to introduction of the NQPS

- § NQPS introduced in 2006 following a major review of Divisions
- § Divisions are the major platform for delivery of primary health care programs
- § Review found lack of clarity of role, variability in performance, inability to demonstrate achievements and value for money
- § NQPS is the key strategy for improving accountability and promoting improvement

§ National Performance Indicators

Governance; Prevention and early intervention;
Access; Integration; Chronic disease management

§ Accreditation

§ Performance Assessment

National picture of performance
Individual performance assessment
Links to rewards and sanctions

§ Literature review identified framework for analysis

- 4 Stakeholder engagement in development
- 4 Having clear objectives
- 4 Type of data collected and approach to analysis
- 4 Feedback.

(Freeman 02)

§ Data sources

- Interviews with 35 Division (CEOs) on early impacts
- Observation of development processes
- Document review

Results

Involving stakeholders in development

- § Development overseen by a Review Implementation Committee comprising key stakeholders
- § Consultation with stakeholders
- § Cautious support amongst CEOs for a standardised national system of performance measurement

Having Clear Objectives

§ System aims articulated in terms of continuous improvement and accountability

"a process to reward high performance, promote best practice, support under performance and sharpen the focus of the network in order to ensure all communities can have similarly high expectations of Divisions network members"

§ Performance measured against program objectives

§ Clear objectives for analysing and feeding back data not articulated

Assurance systems ←————→ **CQI**

**Precision
Ranking
League tables**

**More informal
benchmarking**

NQPS

- 4 Mix of qualitative and quantitative indicators fitted to a conceptual framework
- 4 Indicators at 4 levels from process to intermediate outcomes
- 4 Capture of contextual information
- 4 National Information Strategy

Rewarding and feeding back Performance Information

Assurance systems

Payment and funding
Earned autonomy
Report cards



CQI

Development opportunities
Performance improvement teams

NQPS

Use of points or more qualitative process?

Links to rewards and sanctions?

Performance and development funding pool

CQI training for contact managers?

Conclusions

- § Initial adoption a mix of summative and formative mechanisms
- § No further development
 - So far, the NQPS has enabled:
 - 4 Government to inscribe its expectations for performance
 - 4 For the first time, a nationally consistent assessment of Divisions' capacity to improve health outcomes
 - 4 Linking performance data to program objectives offers a capacity for supporting COI which appears to be unique among comparator country frameworks.
- § Implementation more reminiscent of traditional command and control approach
- § Not realised potential for linking accountability with improvement



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