# Clutha Health First HCH project summary template

# PRE-WORK

|  |  |
| --- | --- |
| Project | What were we trying to accomplish? What was your goal for improvement? |
|  | **We wanted to look at how we were managing patient care at point of contact with the Practice**  **We wanted to “look forward” in the diaries to ensure the patient utilised their time with the Clinician well.** |
|  | **We wanted to improve quality of care and have greater efficiency for the patient**  **We wanted to systematically assess patient needs and respond effectively. Some patients do not attend the Practice frequently so we wanted to ensure that we were aware of what they needed before seeing their Clinician** |
|  |  |
| Plan | What is the evidence for what your improvement goal?What was your plan to test your goal?What measures did have to check if the change is an improvement? |
|  | **We utilise the DRINFO audit tool to identify those patients that have an appointment pending in the next 5-7 days, that also have outstanding issues, ie due a CVRA/ADR/Imms/Cx**  **We print the lists off twice weekly.**  **Every Nurse is assigned a Clinician’s Pre-work list and contacts the patients prior to their appointment and organises for any outstanding clinical interventions to be done, ie the bloods/assessment/Cx**  **This way the Clinician has all bloods etc in front of them when seeing the patient. Both the patient and Clinician’s time is used efficiently and effectively** |
|  | **Another arm of our plan involved an Enrolled Nurse scanning the Clinician’s diaries on the day to check whether booked patients needed update in details, ie height/weight/BP/Cx** |
|  |  |
|  |  |
| Do | Was the plan executed? Where there any unexpected events or problems? |
|  | **Yes the DRINFO Pre-Work started October 2019 and has continued since.** |
|  |  |
|  |  |
|  |  |
| Study | Record, analyse and reflect on the results. |
|  | **It has been beneficial for the patient to know that we are pre-empting their care.**  **There is also obvious benefits for the Clinician, having all bloods up-to date and recalls checked when the patient is sitting in front of them.** |
|  |  |
|  |  |
|  |  |
| Act | What will you take forward from this work?What should other practices do? |
|  |  |
|  |  |
|  |  |
|  |  |