

3C's: Collaboration, co-location, communication

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Collaboration is the key



Collaboration:

The action of working with someone to produce something



Mullumbimby Comprehensive Health Centre

- 10 GPs
- 3 Psychologists
- 1 MHN (Frozen funding)
- 5 RNs (1 FTE Chronic Disease Nurse)
- 7 Admin staff
- QML Pathology
- Allied Health (2 x Osteo, Dietitian, Physio)
- 1 Dental chair (2 from next year)

In practice

- Increased communication between practitioners
- Case conferences
- Flagging of urgent cases
- Education sessions (both internal and external providers)
- Large lunch area

Collaboratives

- 5 x collaborative participation
 - Diabetes
 - COPD
 - eHealth
 - CKD and CHD
 - ** ICC – LHD, PHN, GP
- Why?
 - Continuous quality improvement
 - Access tools and support
 - Steal shamelessly and share generously
 - Networking

Health Audit Tool - (For use by clinical staff)

Name: _____ Age: _____ D.O.B: ____ / ____ / ____

Weight: _____ kg Height: _____ cm Waist: _____ cm

		Diabetes	Heart	Kidneys	Lungs
Circle the number or dash that applies to each answer.					
Gender:	male	1	1	-	-
	female	-	-	-	-
Age:	under 40	-	-	-	-
	40 + years	1	1	1	1
Aboriginal or Torres Strait Islander origin?	yes	1	-	1	-
	no	-	-	-	-
Currently has diabetes (type 1 or 2)? if yes, scribble out/put a line through the green column - this does not need to be completed.	yes	-	1	1	-
	no	-	-	-	-
Has heart disease or has experienced a heart attack or stroke? if yes, scribble out the red column.	yes	-	-	1	-
	no	-	-	-	-
Has kidney disease (renal impairment)? if yes, scribble out the blue column.	yes	-	1	-	-
	no	-	-	-	-
COPD, COAD or emphysema? if yes, scribble out the yellow column.	yes	-	-	-	-
	no	-	-	-	-
Parents, brothers or sisters ever diagnosed with: →	diabetes?	1	-	-	-
	heart disease?	-	1	-	-
	kidney disease?	-	-	1	-
	no, none of the above	-	-	-	-
Ever been found to have high blood sugar e.g. during illness, routine blood tests or pregnancy?	yes	1	-	-	-
	no	-	-	-	-
Takes medication for high blood pressure?	yes	1	1	1	-
	no	-	-	-	-
Has ever been diagnosed with acute kidney injury?	yes	-	-	1	-
	no	-	-	-	-
Smokes cigarettes or other tobacco?	yes	1	1	1	1
	ex-smoker	-	-	-	1
	no	-	-	-	-
Coughs several times on most days?	yes	-	-	-	1
	no	-	-	-	-
Brings up phlegm or mucus on most days?	yes	-	-	-	1
	no	-	-	-	-
Gets more out-of-breath than others their age?	yes	-	-	-	1
	no	-	-	-	-
Exercises often e.g. 30+ minutes on most days?	yes	-	-	-	-
	no	1	1	-	-
Abdominal obesity? "extra belly fat"	yes	1	1	1	-
	no	-	-	-	-
Has been told by their doctor that cholesterol is high or above normal range?	yes	-	1	-	-
	no	-	-	-	-
Total score (for each column)					

Diabetes risk score 4 or more:
Perform an AUSDRISK test or OGTT.

Heart risk score 4 or more: Perform an
Absolute Cardiovascular risk test

Kidney disease risk score 2 or more: Perform a
kidney triple test: BP, eGFR & urinary microalbumin.

Lung disease risk score 3 or more: Perform COPD screening
with PiKo-6 or COPD6 or arrange spirometry testing.

Cardiovascular screening criteria reproduced with permission from Absolute cardiovascular disease management. Quick reference guide for health professionals. 2012. © 2012 National Stroke Foundation.

Kidney screening criteria adapted with permission from Chronic Kidney Disease (CKD) Management in General Practice (3rd edition). Kidney Health Australia, Melbourne, 2015

Lung screening questions reproduced with permission from the Global Initiative for chronic obstructive lung disease "Could it be COPD?" screening questionnaire.

CQI

- Whole of organisation culture change
 - “How can we do things better”
- Requires a clear Aim
- IHI Triple Aim
 - Improve the patient experience
 - Improve the health of population
 - Reduce cost



Co-location

- Collaboration: NCML, Northern NSW LHD, GP Practice – Pilot study
- Specialist NP employed by LHD provided services from GP practice
- CKD Nurse Practitioner – Graeme Turner
 - Accessed patient files
 - Provided education and identified patients
 - Consulted with GP at completion of consultation
 - Continuing beyond Pilot

SMA

- Shared Medical Appointment
 - Multiple patients 8 – 15, 1 GP, 1 Facilitator
- Diabetes and Gutbusters
- GP has 1:1 consultation in front of other group members
 - Learn from each other – health literacy
 - See others have same issues
 - Offer advice to each other
 - Decreased fears

Seating Arrangement in a Typical SMA



Doctor

Documenter

Facilitator

Nurse in consulting room →

Communication

- Essential to collaboration
 - Consumer : Health professional
 - Health professional : Service
 - Health professional : Health professional
- Many forms
 - Written referral
 - In person
 - Phone
 - Reports

Conclusion

- Proximity and co-location creates integration and collaboration
- Collaboration enhances service and facilitates change
- Communication is key
 - Needs to be worked at

