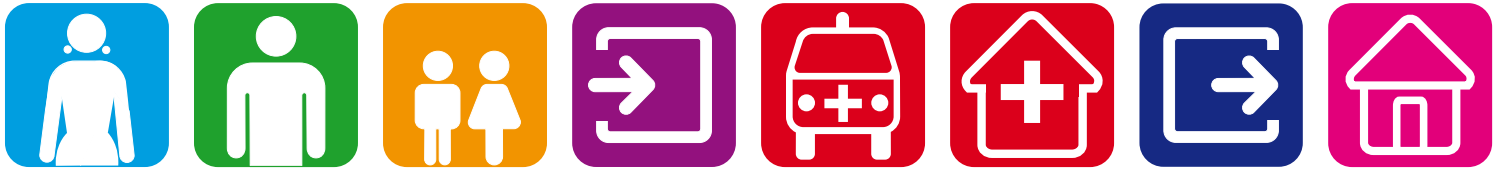


General Practitioner Liaison Program

Planning process 2007–10



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1.0 Introduction

In 2001-02, as part of the *Hospital demand management strategy*, Hospital Admission Risk Program (HARP) funding was made available to increase Victoria's acute and primary care liaison activities. General practitioner liaison (GPL) services were significantly expanded to address the diminishing flow of information and the widening gap at the interface between hospital medical care and primary care provided by general practitioners (GPs).

Some HARP projects that focussed on cardiac and respiratory disease, the frail aged and those with psycho-social problems, were mainstreamed into HARP Chronic Disease Management (HARP CDM) four years later. The Department of Human Services Statewide Emergency Program (SEP) retained responsibility for the GPL program.

In accordance with the *Better, faster emergency care strategy*, SEP commissioned a review of the GPL program in April 2006 to identify the breadth of GP liaison practice in metropolitan and rural settings and, cognisant of current government policy directions and key stakeholder views, develop recommendations for the future of the GPL program.

The findings of the review indicated that GPL services have achieved significant changes in the areas of information flow, processes of care and relationships and communications. These systemic improvements were designed to improve patient experiences and outcomes.

The GPL review also highlighted there was no consistent framework to guide the structure, operation and funding of the GPL program in Victoria and no established mechanisms to ensure GPL services are aligned with

government and health service policy directions. In addition there was a lack of systematic evaluation and reporting processes for GP liaison activities, which minimised accountability, information sharing and outcome measurement.

To date, GPL services have received some informal support through the General Practice Divisions Victoria (GPDV). Key recommendations of the review included establishing a statewide GPL program coordination service and implementing reporting and accountability mechanisms that ensured GPL services aligned with government and health service policy directions.

Responding to the review, SEP has funded GPDV to establish a statewide coordination service in March 2007. One of the key activities to be undertaken by the new service before 1 July 2007 is to develop, document and implement a three-year planning cycle for GPL services in conjunction with SEP and under the guidance of the Emergency Access Reference Committee (EARC) Primary Care Subcommittee.

This paper has been produced to support the implementation of the new planning process by providing health services with:

- a description of the role, structure and functions of the GPL Program Coordination Service
- an overview of the process for establishing a statewide framework and strategy plan for the GPL service
- an outline of the annual planning process and associated templates to be used by health services and their GPL services.

2.0 General Practice Liaison Program Coordination Service

In October 2006, SEP and GPDV commenced discussions about the role, structure and functions of the GPL Program Coordination Service and a service agreement detailing the objectives and key performance indicators for the service. The details of the coordination service as endorsed by the EARC-Primary Care Subcommittee are shown in Table 1 below.

Table 1: General Practitioner Liaison Program Coordination Service

Service
General Practitioner Liaison (GPL) Program Coordination Service
Aims of the service
The aim of the GPL Program Coordination Service is to support health services to provide a GPL program in accordance with Department of Human Services policies and strategic directions.
Service description
<p>The GPL Program Coordination Service will:</p> <ol style="list-style-type: none"> 1. deliver an agreed three-year statewide GPL strategy plan consistent with the department's GPL framework and priorities 2. facilitate the preparation of annual health service plans for GPL services that are consistent with the three-year statewide GPL strategy plan 3. act as a conduit for information and issues relevant to the GPL program 4. coordinate new innovative project-based activities for the GPL program 5. build on existing service coordination arrangements, facilitate the development of communication and patient-referral processes between health services and primary care services 6. facilitate professional development and training for GPL services 7. facilitate consultation processes between the department, health services and GPL services on policy-related matters 8. contribute to the development of the National GPL network 9. provide regular reports on the activities of the GPL Coordinating Service as part of the funding and service agreement with the Statewide Emergency Program (SEP).
Service provider
General Practice Divisions Victoria (GPDV) will be funded to provide the GPL Program Coordination Service in Victoria for a three-year period commencing in March 2007.
Relationship with the Department of Human Services
A funding and service agreement will be negotiated between SEP and GPDV outlining the role of the GPL Program Coordination Service and its objectives and key performance indicators. GPDV will be required to provide regular reports to SEP on the activities of the service. SEP will ensure departmental priorities are prepared as part of the strategic planning process for the GPL program.
Relationships with health services
The GPL Program Coordination Service will be a central resource that supports health services providing a GPL program. Regular contact will be maintained between health services and the coordination service.

3.0 Planning process for the General Practice Liaison Program

A planning process involving the preparation of a statewide three-year strategy plan and health service annual action plans is proposed for GPL services to ensure the program is aligned with government and health service policy directions and that there are systematic processes that promote accountability, information sharing and outcome measurement.

The process for developing a framework and for developing statewide and health service plans is outlined in the following sections.

3.1 Framework for the General Practice Liaison Program

The GPL review highlighted the need for a consistent framework to guide the structure, operation and funding of the GPL program in Victoria. SEP will develop a framework outlining the aims of the GPL program, its role, core and enabling functions, structure, governance and key relationships within the health sector. The framework will provide a policy context for the GPL planning process.

3.2 Statewide strategy plan

The GPL Program Coordination Service will develop a three-year statewide GPL strategy plan in collaboration with SEP and GPL services under the guidance of the EARC – Primary Care Subcommittee. The plan will be developed from the department’s strategic directions and the input from health services and their GPL services.

Departmental strategic directions

The GPL program needs to align with government and departmental policy directions. A number of areas in the department, with particular relevance to the GPL program, have established strategic directions specific to the GPL program within their overall policy statements. The areas are:

- emergency care
- elective surgery
- outpatients
- sub-acute care
- mental health
- maternity services
- primary health.

The policy frameworks relevant to other aspects of health also need to be considered as relevant to individual GPL services.

The department’s three-year strategic directions will form the basis of consultations with GPL services and their health services to formulate an agreed position.

Health service priorities and General Practitioner Liaison Program directions

Utilising a consultative process, the GPL Program Coordination Service will identify and document the priorities and strategic directions for the GPL program from a health service and GPL program perspective. This approach will ensure local needs and innovations are incorporated into the three-year strategy plan and there is capacity for services to work collaboratively to develop program-wide approaches to common issues and themes.

Local divisions of general practice will have input into the planning process at both the health service and program levels.

Statewide strategic goals

The three-year GPL strategy plan will outline the statewide strategic goals for the GPL program for the period 2007–10.

Individual GPL services will choose the strategic goals for their health service from the suite of statewide strategic goals contained in strategy plan. Each service will select their goals according to the service profile of their health service, previous work undertaken by GPL services and the work programs established by the department to roll out new initiatives.

The strategic goals will form the basis of the action plans developed annually by each health service.

3.3 Annual action plans

The planning process for the annual action plans will take place at the health service level with the support of the GPL Program Coordination Service and the participation of local divisions of general practice. The proposed planning process is summarised in the flow chart opposite.

Step 1 – Examine GPL program framework and statewide strategic plan

The GPL service plans need to align with government and departmental policy directions and statewide GPL program directions. Each health service will review the GPL program framework and the statewide strategy plan and select the strategic goals the health service will address over the years 2007–10.

The environmental analysis outlined in Step 2 will assist in the selection of relevant strategic goals.

Step 2 – Environmental analysis

Health service context

GPL service planning will take place in the context of planning and reporting processes currently utilised by each health service. Each health service will have its own internal strategic and business planning processes, which articulate its mission statement, values, strategic goals and priorities, service profile and the population served by the health service. GPL services need to identify the priorities and types of services and populations that will form their areas of focus in the health service. This material will provide the health service context for the environmental analysis. It is available in the statement of priorities, annual reports and strategic and business plans produced by each health service.

Key issues

GPL services will need to identify the key issues to be addressed in their annual action plans by conducting an environmental analysis and consultations with key stakeholders. Information for an environmental analysis can be obtained from a variety of sources including:

- surveys and other feedback from general practitioners and divisions
- audits of key hospital processes such as discharge summaries and referrals
- analysis of complaints to health services
- analysis of activity data
- IT business plans
- consultations with key stakeholders such as divisions of general practice, departmental heads, HARP services, primary care partnerships and community advisory committees.

The key issues identified through consultations and the environmental analysis will inform the selection of statewide strategic goals to be worked on in the health service during 2007–10.

Step 3 – Develop annual action plan

The broad direction provided by each strategic goal will be developed into annual objectives, which specify the outcomes to be achieved in each financial year.

Each objective will be accompanied by a series of actions that will be undertaken to realise the objective. The individuals and groups responsible for the various actions and the associated timelines (commencement and completion dates) will also be identified and documented.

Program measures will be specified for each annual objective that can demonstrate the extent to which the objectives have been achieved.

The GPL Program Coordination Service will work with GPL services over the three-year planning cycle to progressively develop performance measures that may be utilised in the planning and reporting of GPL services.

To summarise, the annual action plan will be comprised of the following elements:

- statewide strategic goal
- annual objectives
- annual actions
- timelines
- responsibilities
- program measures.

The annual action plans developed for each GPL service will be forwarded to the GPL Program Coordination Service where they will be collated and a report submitted to SEP.

Step 4 - Annual report

At the end of each financial year GPL services will prepare an annual report for their health service detailing the outcomes of their activities against their annual objectives. This information will provide feedback on progress and can be utilised in the environmental analysis when developing action plans in subsequent years. The planning process will also serve to raise the profile of the GPL program in the health service.

4.0 Template for annual action plans

A template for the annual action plan has been developed to assist GPL services with the planning process and ensure consistency of reporting to the GPL Program Coordination Service.

Appendix 1 contains a series of templates for developing and documenting an annual action plan for GPL services at the health service level. The templates are as follows:

- **descriptive template** – providing a definition of material to be used in each section of the template
- **planning template** – blank templates to be completed by health services in preparing three-year strategic goals
- **completed example of template** – a completed template providing an actual example of the material to be included in a planning template.

Flow chart for annual planning process

Step 1

Examine GPL framework and statewide strategy plan

- Review framework for GPL program and three-year statewide strategy plan
- Identify statewide strategic goals for health service to work on



Step 2

Environmental analysis

- Identify mission statement, values, strategic goals and priorities for the health service
- Examine the service profile and population of the health service
- Conduct environmental analysis for GPL program within health service
- Conduct stakeholder consultations
- Identify key issues



Step 3

Develop annual action plan

- Identify annual objectives and associated actions, responsibilities and timelines
- Identify program measures



Step 4

Annual report

- Prepare annual report detailing progression and outcomes against annual objectives
- Utilise information in environmental analysis when developing action plan in subsequent years

5.0 Planning participants and responsibilities

A number of participants will be involved in the planning process for the GPL program including:

- GPL Program Coordination Service
- Statewide Emergency Program
- health services
- divisions of general practice.

The responsibilities of each participant are detailed below.

GPL Program Coordination Service

Under the terms of the service agreement between the department and GPDV, the GPL Program Coordination Service will develop, document and implement a three-year planning cycle in conjunction with SEP and under the guidance of the EARC Primary Care Subcommittee by means of a statewide planning forum and direct support to health services.

The GPL Program Coordination Service in conjunction with SEP will develop a three-year statewide GPL strategy plan and will collate annual action plans and provide a written summary report to SEP.

The GPL Program Coordination Service will also collate and maintain an accessible directory of existing and innovative activities undertaken by services in the GPL program as a resource for health services. GPL services will be able to identify programs and activities utilised by other services that can be incorporated into their action plans.

Statewide Emergency Program

SEP will develop a framework for the GPL Program and contribute to the three-year strategy plan for the GPL Program.

Health services

Health services and the GPL service in particular will be responsible for conducting the planning process at the health service level, contributing to the development of the statewide GPL strategy plan and producing an annual action plan. Health service endorsement will be required for the action plans.

Divisions of general practice

Local divisions of general practice will be key participants in the GPL planning process, as they are the representative body for GPs – those the health service are seeking to engage through the GPL service. Divisions will participate in the statewide and local consultation processes as key stakeholders and may provide letters of support for GPL service action plans.

6.0 Review of the planning process

At the end of the three-year planning cycle SEP will review the planning process developed for the GPL program to ensure it is the most effective means of ensuring the program is aligned with government and health service policy directions and promoting accountability, information sharing and outcome measurement across the program.

Appendix 1: Templates for annual action plan for the General Practice Liaison Service

Template A: Descriptive template

Template providing a definition of material to be used in each section of the template.

Template B: Planning template

Blank templates to be completed by health services in preparing three-year strategic goals.

Template C: Completed example of template

A completed template providing an actual example of the material to be included in a planning template.

Template A: Descriptors for General Practice Liaison Program annual action plan template	
Annual objectives	Annual objectives are specific outcomes that must be achieved to accomplish strategic goals established for the GPL program.
Actions	Specific actions to be undertaken to reach an annual objective.
Responsibilities	Specification of individuals and groups responsible for each activity.
Timelines	Statement of expected dates of commencement and completion for each action.
Program measure	Outcomes that indicate the extent to which the objective has been achieved.

Template B: Template for annual action plan for General Practice Liaison Program					
Strategic goal:					
Objectives	Actions	Timelines	Responsibilities	Program measure	

Template C: Completed example of annual action plan template for General Practice Liaison Program

Strategic goal: Facilitate direct referrals from GPs to hospital programs that provide an alternative to an ED presentation.

Objectives	Actions	Timelines	Responsibilities	Program measure
1. To enable GPs to make direct referrals to Hospital in the Home (HITH) for suitable patients	<ol style="list-style-type: none"> 1. Establish and chair a working group to develop a standardised referral protocol for direct GP referrals to HITH 2. Identification of specific conditions eligible for direct referral and development of clinical management guidelines 3. Develop process for recruiting and affiliating GPs as visiting medical officers (VMO) on an ad hoc basis through ED and as affiliated VMOs (AVMO) on a permanent basis 4. Circulation of clinical management and HITH practice and program guidelines to AVMOs 5. Provision of ongoing professional development sessions relevant to HITH 6. Address GP complaints about process 	<p>1 July 2007 to 30 September 2007 (three months)</p> <p>1 August 2007 to 30 September 2007 (two months)</p> <p>Ongoing</p> <p>Ongoing</p> <p>Ongoing basis</p> <p>Ongoing</p>	<p>Manager GP HITH, ED director and GPLO</p> <p>Manager GP HITH, ED director and GPLO</p> <p>Manager GP HITH, ED consultants</p> <p>Manager GP HITH</p> <p>GPLO and manager GP HITH</p> <p>GPLO</p>	<p>Completion of standardised referral protocols for direct referrals to HITH</p> <p>Completion of clinical management guidelines</p> <p>Referrals for GP management in HITH program at capacity</p> <p>Provision and uptake of professional development sessions on HITH</p>