Service Coordination Survey 2015

State-wide report

Victoria

Responses to the Service Coordination Survey

38	-	Barwon South Western
24	-	Eastern Metro
53	-	Gippsland
47	-	Grampians
42	-	Hume
59	-	Loddon Mallee
39	-	North & West Metro
37	-	Southern Metro

339 responses from across Victoria

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Contents

1. Introduction

Overview

There are many different types of services available across Victoria's health and human services system. No common system automatically links services to allow people with multiple needs to access coordinated care.

The service coordination framework helps service providers to work together to align practices, processes and systems so:

- people access the services they need, no matter what service they go to first
- providers exchange the right information so consumers receive good care from the right providers at the right time
- people have their health and social needs identified early, preventing deterioration in health.

Service coordination places consumers at the centre of service delivery. It enables organisations to remain independent of each other, while cooperating to give consumers a seamless and integrated response. In particular, the practice of service coordination helps enable more effective ways of supporting people with complex and multiple needs.

Primary Care Partnerships (PCPs) work with organisations in their local area and focus on better coordination among services, improved chronic disease management, prevention and integrated health promotion and strong partnerships.

The service coordination survey measures some of the accountability indicators in the PCP Program Logic 2013-17 for early intervention and integrated care. PCPs are expected to strongly encourage the organisations they work with to complete the survey. The department also expects its funded organisations to participate in Primary Care Partnership activities as appropriate and to provide quality service coordination practice, as required in the department's Policy and Funding Guidelines for 2014-15.

About this report and survey

The service coordination survey:

- allows organisations to track their own progress in service coordination practice and to view it in comparison to that of other organisations
- provides information to PCPs to enable them to focus their efforts to support organisations in their area
- provides information to the department about the results of its strategies to support system change in service coordination across Victoria.

The survey is undertaken within the context of an ongoing quality improvement process and can provide evidence for service and program reporting requirements (e.g. Quality Care Reports) and accreditation processes.

This report shows service coordination practice results for regions and the state. The system and practice areas measured in this report include:

- eHealth
- shared care/case planning
- communication with general practice
- initial needs identification
- referral

Changes between 2013 and 2015 survey

Some additional information was gathered in the 2015 survey, including on:

- which tools other than SCTT are used for referral
- which particular sections of the SCTT suite are used and valued
- quality improvement areas organisations are focusing on
- organisations' feedback on PCPs' support in service coordination practice.

In the 2013 survey, respondents were asked to answer yes/no to whether they had achieved some practice measures for at least 70% of clients. In 2015, the survey question was changed to allow respondents to give the actual percentage of clients. This report shows the average percentage answer for practice measure, by region and for the state. The 70% point is still displayed, so results can be compared to those for previous years.

In an effort to streamline responses and demands on organisations, PCPs were encouraged to nominate a 'lead PCP' to liaise with an organisation that crosses PCP catchments. In some cases, this may affect the overall results for the PCP or region when compared to the previous survey results, if an organisation no longer submits a survey to the same PCP catchment.

Feedback to organisations has also changed. In 2013, organisations that submitted multiple responses (different submissions for individual programs/services/sites within an organisation), received an aggregate report with organisation results represented by the majority response, whereas in 2015, organisations will receive a report for each completed survey response submitted.

2. Reading the results

Organisations had the flexibility to choose whether to provide a single survey response for each program/service/site, or whether to provide a consolidated response for the organisation. The basis for this decision was whether or not organisations judged their service coordination practice to be consistent across sites or programs/services.

Analysis of results

The results are provided based on the number of surveys completed, rather than the number of organisations. This should provide a more accurate picture of service coordination practice, but may make comparison with the aggregated results for the 2013 survey less straightforward.

Comparisons

The report compares results for each survey item for the region and the state. The comparison figure is based on the percentage of completed surveys submitted (not unique organisations) in each of the groups.

Rounding

Throughout the report, percentages have been rounded to whole numbers. When looking at charts and tables, figures may not always add up to 100%. However, if more decimal places were used, additions would be correct. A value of 0 indicates a response greater than 0, but smaller than 0.5.

Handling of no answers and invalid responses

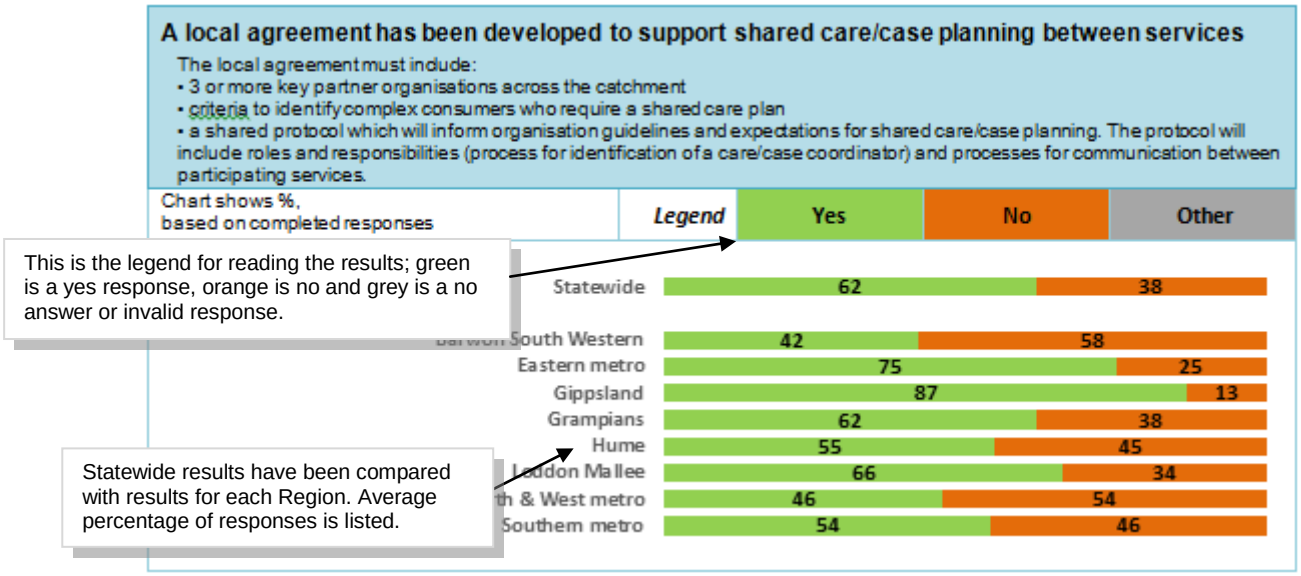
Respondents who did not answer a question or who chose an invalid value as their response were recorded as 'other', presented as a grey box.

Definitions

Because organisations could submit more than one survey response, when discussing results, the term respondent has been used throughout this report. This reflects that results may apply to an organisation or may apply to practice in part of an organisation.

How to read the charts

Below is an example of a chart you will find throughout the report, with an explanation on how to read this.



Using the results

The Service Coordination Survey 2015 provides an important source of information which will be used by the Department of Health and Human Services and PCPs to continually measure the level of integration and coordination across a broad range of health and human services.

More importantly, the results of the survey can be used throughout the sector by managers, networks, working groups, organisations and PCPs to inform planning and monitor improvement strategies. The Department of Health and Human Services encourages all organisations to engage with the results of the survey and think about how change can be affected at a systems level to improve results over time.

If the report highlights opportunities for practice improvement, please contact your PCP for information about available resources.

3. System measures

E-Health

This section identifies the E-health facilities the organisation is using.

Secure messaging/communication system used

Type:	% Victorian respondents that use
Connecting Care	44
S2S	34
Argus	7
RIMS (via connecting care)	4
BETTI	4
ReferralNet	3
Other*	27

**Other responses included: No answer, none, standard eMail, TRAK, SWARH, My Aged Care Portal, Healthlink, eReferral and Bossnett.*

Client information management software application used

Also referred to as patient information management system

Type:	% Victorian respondents that use
IPM	19
UNITI	14
TCM	13
TrakCare	11
IRIS	10
Carelink +	9
Xpedite	8
Medical Director	7
HMS	7
PJB	6
ACE	6
SWITCH	5
Best Practice	4
Penelope	4
CRISP	4

Version of SCTT in your client information management system

Type:	% Victorian respondents that use
SCTT2006	3
SCTT2009	39
SCTT2012	40
Don't use SCTT	19

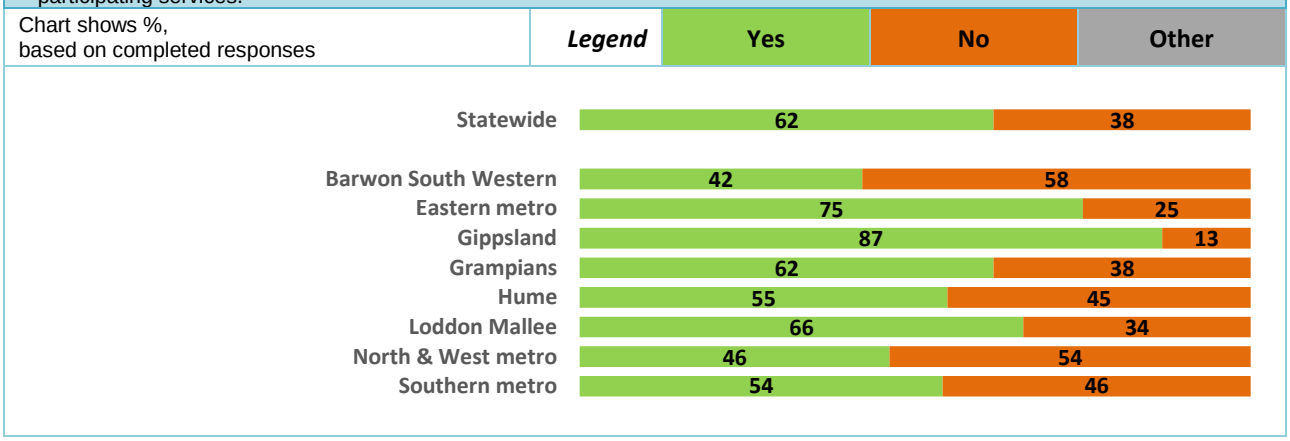
Shared care planning

This section identifies system development to support shared care/case planning across organisations.

A local agreement has been developed to support shared care/case planning between services

The local agreement must include:
- 3 or more key partner organisations across the catchment
- criteria to identify complex consumers who require a shared care plan
- a shared protocol which will inform organisation guidelines and expectations for shared care/case planning. The protocol will include roles and responsibilities (process for identification of a care/case coordinator) and processes for communication between participating services.

Chart shows %, based on completed responses

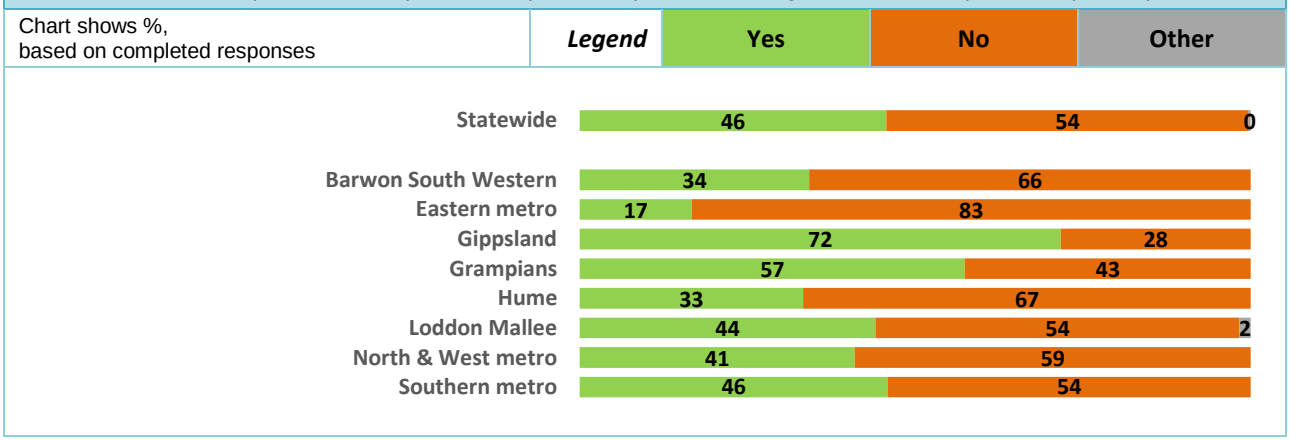


A local agreement to support shared care/case planning between services has been implemented by the organisation.

The local agreement /protocol (as defined above) must meet the following criteria:

- The local agreement/protocol is integrated into the organisation's practice and procedures guidelines, work plans and job descriptions
- There is compliance with the practice and procedure (measured through a continuous improvement process)

Chart shows %, based on completed responses



GP Communication

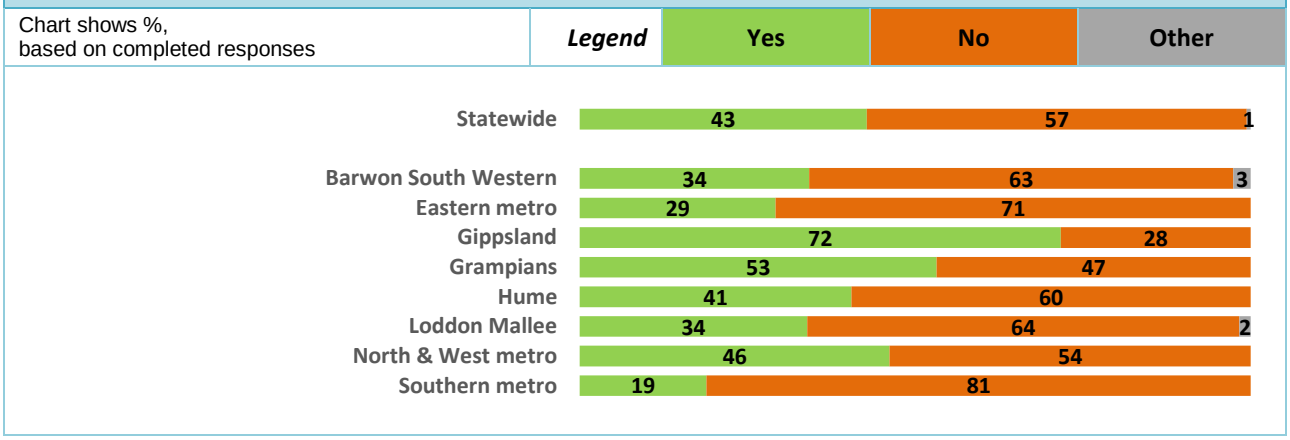
This section of the report identifies systems approaches to improve communication with GPs.

Documented and agreed communication processes with general practice have been developed

The agreed communication processes:

- are developed with input from general practice
- must include guidelines and expectations for communication with general practice

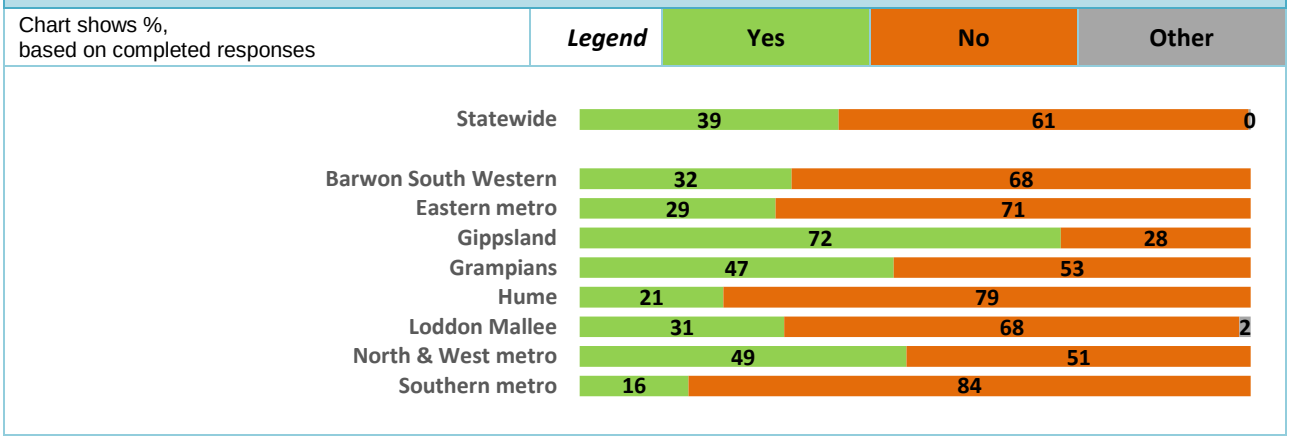
Chart shows %, based on completed responses



Documented agreed communication processes with general practice have been implemented by the organisation

These are integrated into the organisation's practice guidelines and procedures, job descriptions and work plans.

Chart shows %, based on completed responses



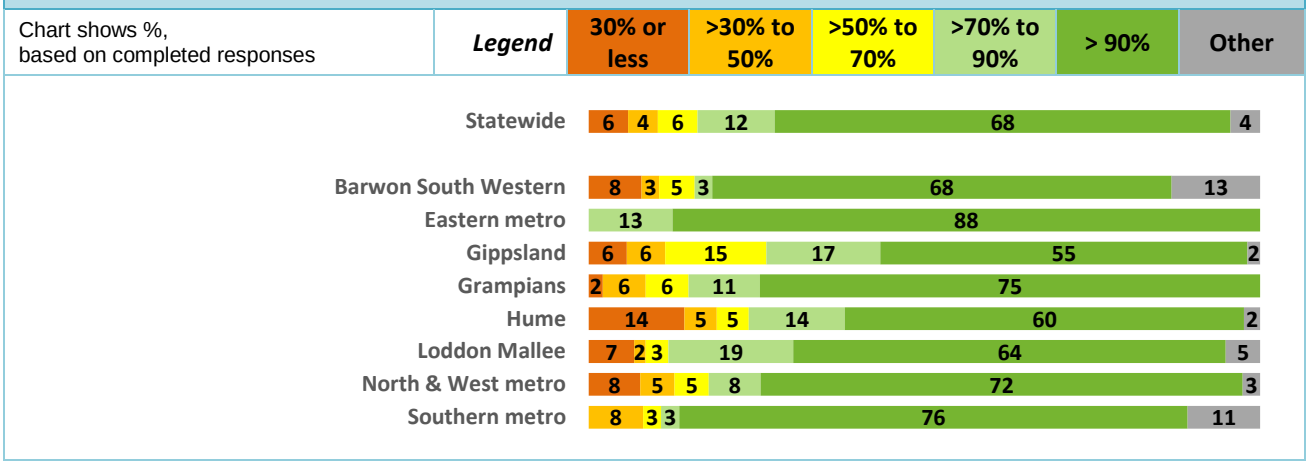
4. Practice measures

Initial needs identification

This section identifies the broad screening practice within the organisation using a consumer centred approach.

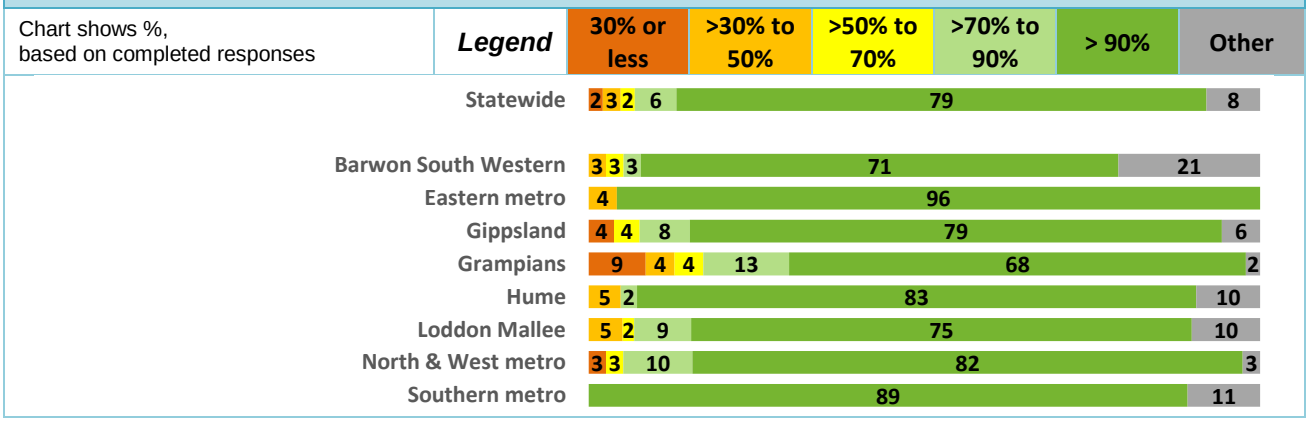
% of consumers' / patients' clients' records that had an initial needs identifications conducted

Chart shows %, based on completed responses



% of initial needs identifications processes that resulted in documented decisions about appropriate actions (e.g. assessment, referrals, information, consumer refuses further action)

Chart shows %, based on completed responses

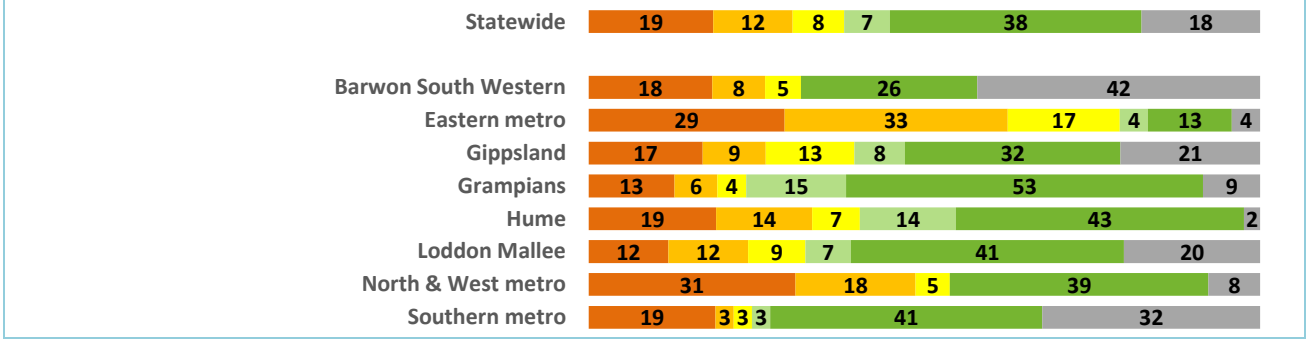


Service Coordination Tool Templates (SCTT)

This section identifies how much SCTT is used for referral.

% of referrals were sent (internal and external to the organisation) using the SCTT

Chart shows %, based on completed responses

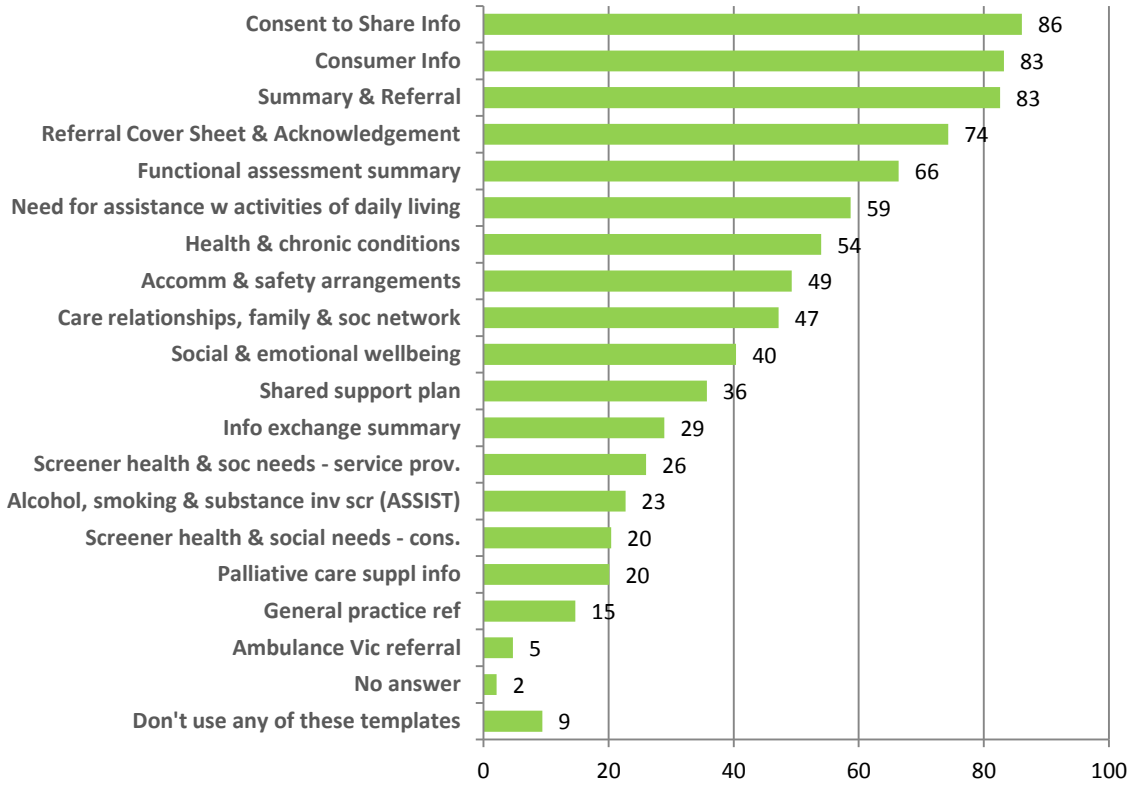


SCTT used by organisation for referrals

This chart and table show the percentage of respondents that use each template.

Respondents could choose more than one answer option for this question

Based on completed responses

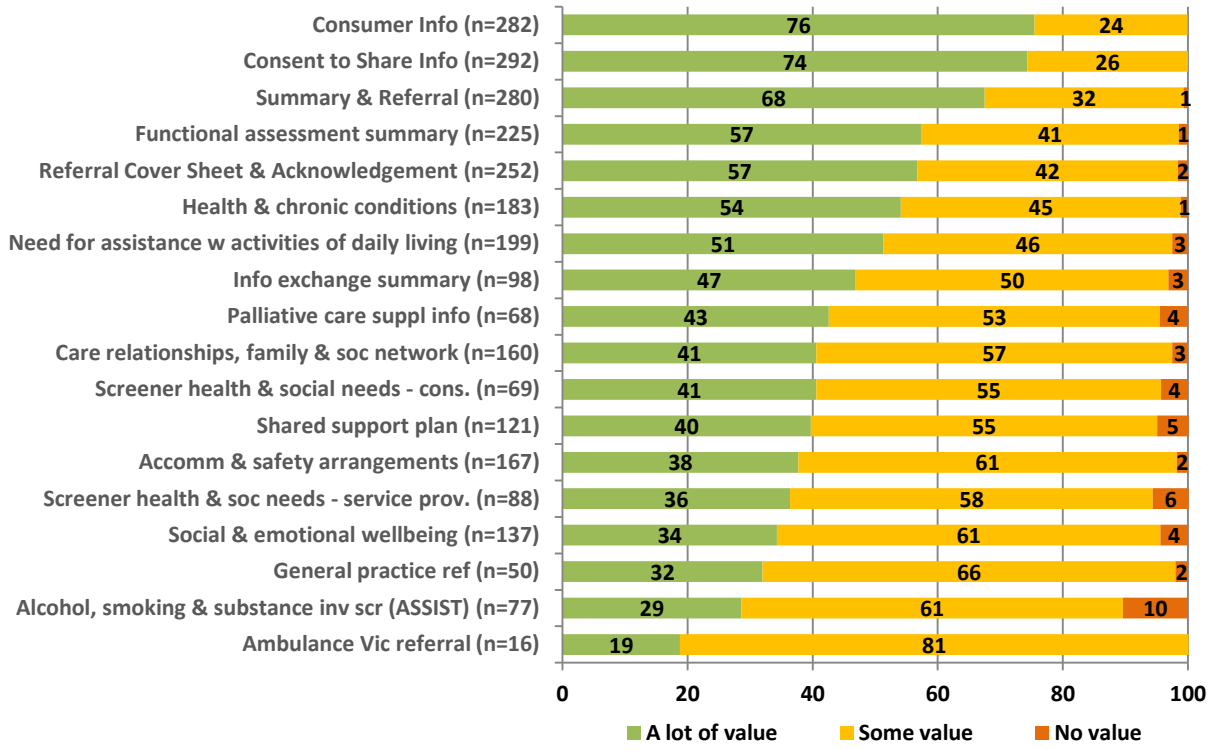


% of respondents in each region that use	Barwon SW	Eastern metro	Gipps land	Gramp	Hume	Lod Mal	Nth & West	Sthn
Consent to Share Info	58	96	96	89	95	85	90	78
Consumer Info	53	88	93	94	91	81	90	73
Summary & Referral	55	79	91	94	93	76	92	76
Referral Cover Sheet & Acknowledgement	42	83	83	89	86	71	87	49
Functional assessment summary	47	92	57	79	71	56	80	65
Need for assistance w activities of daily living	50	79	43	72	64	54	72	46
Health & chronic conditions	42	79	36	66	62	49	67	46
Accomm & safety arrangements	37	63	43	66	57	41	54	41
Care relationships, family & soc network	37	83	28	60	57	37	64	32
Social & emotional wellbeing	29	50	38	60	41	32	46	32
Shared support plan	26	29	28	51	57	44	26	14
Info exchange summary	21	54	9	47	33	31	23	24
Screener health & soc needs - service prov.	13	25	32	40	33	19	31	11
Alcohol, smoking & substance inv scr (ASSIST)	16	17	11	36	29	29	26	14
Screener health & social needs - cons.	16	17	19	40	24	19	15	8
Palliative care suppl info	13	38	13	38	19	19	15	11
General practice ref	13	21	15	4	24	14	21	11
Ambulance Vic referral	3	4	9	9	5	2	3	3
No answer	5					3		8
Don't use any of these templates	37	4	2	6	5	10	3	11

SCTT templates valued by organisation

This chart and table show how much respondents value the templates that they use.

Based on completed responses



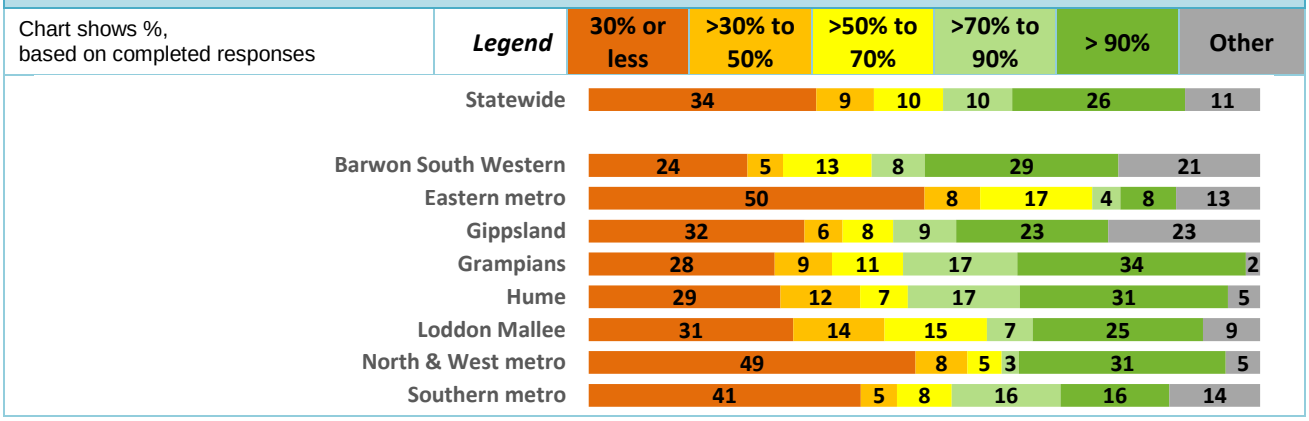
% of respondents in each region that value*	Barwon SW	Eastern metro	Gipps land	Gramp	Hume	Lod Mal	Nth & West	Sthn
Consumer Info	100	100	100	100	100	100	100	100
Consent to Share Info	100	100	100	100	100	100	100	100
Summary & Referral	100	100	100	100	100	98	97	100
Functional assessment summary	100	100	100	100	100	100	94	96
Referral Cover Sheet & Acknowledgement	100	95	98	100	100	98	97	100
Health & chronic conditions	100	100	95	100	100	100	96	100
Need for assistance w activities of daily living	100	100	96	97	100	97	96	94
Info exchange summary	100	100	80	100	100	89	100	100
Palliative care suppl info	100	100	100	100	100	82	83	100
Care relationships, family & soc network	86	100	100	100	100	95	100	92
Screener health & social needs - cons.	100	100	100	95	100	82	100	100
Shared support plan	100	71	93	100	96	96	90	100
Accomm & safety arrangements	100	100	100	100	100	92	95	100
Screener health & soc needs - service prov.	100	83	94	95	100	82	100	100
Social & emotional wellbeing	100	100	100	100	94	89	89	92
General practice ref	100	100	88	100	100	100	100	100
Alcohol, smoking & substance inv scr	100	100	100	94	75	88	80	100
Ambulance Vic referral	100	100	100	100	100	100	100	100

**Value: A lot of value and some value combined*

Shared care planning

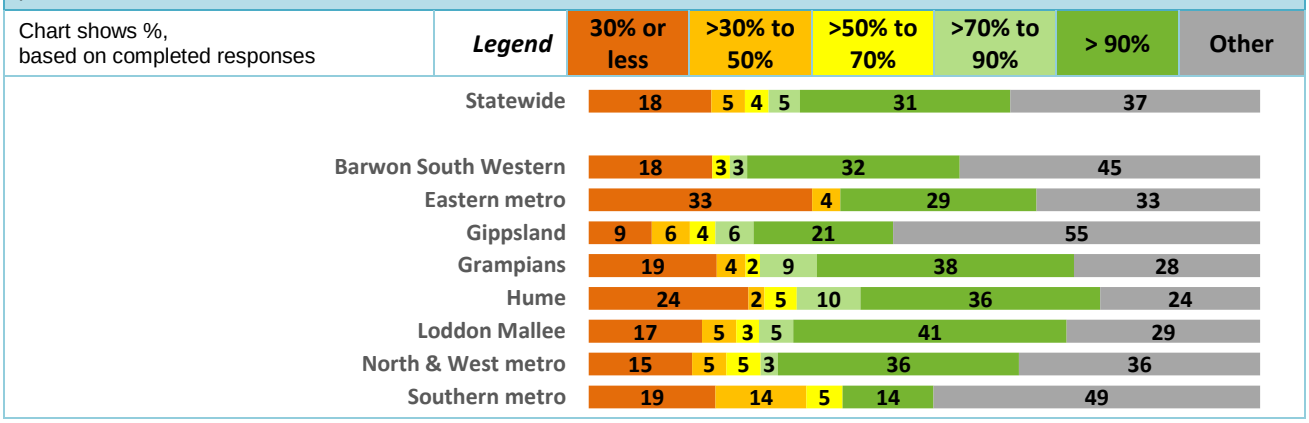
This section identifies the level of shared care planning practice within the organisation.

% of consumers with multiple or complex needs who are receiving services from more than one service provider have a shared care/case plan



% of shared care/case plans have been communicated with the GP, if the consumer has a GP

This includes any care plan that is shared between services e.g. General Practice Team Care Arrangements, SCTT Shared support plan.



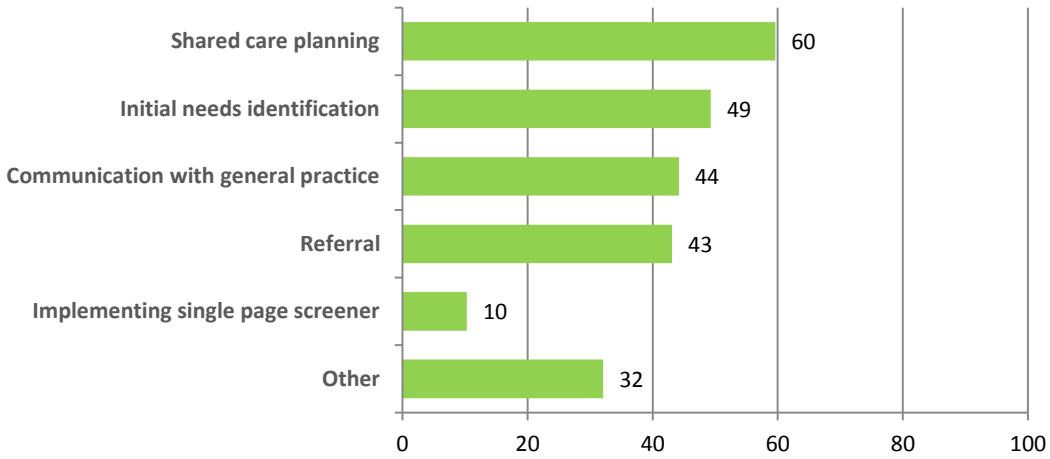
Quality improvement

This section shows respondents' areas of activity in quality improvement.

Main area(s) you currently focus on

The bars in the chart show the percentage of respondents that focus on an area.

Respondents could choose more than one answer option for this question



**Of the other responses, 22 related to care planning, 22 related to e-referral, 12 related to assessment, 12 related to intake systems and 6 were about discharge/transition planning.*

% of respondents in each region that focus on	Barwon SW	Eastern metro	Gipps land	Gramp	Hume	Lod Mal	Nth & West	Sthn
Shared care planning	61	29	74	60	62	63	62	49
Initial needs identification	47	50	32	45	55	53	59	60
Communication with general practice	53	29	25	49	60	39	51	51
Referral	45	58	8	36	52	46	59	60
Implementing single page screener	18	4	4	15	14	3	21	5
Other	45	29	64	13	36	17	21	32

PCP has helped / supported organisation to improve service coordination practice

Chart shows %,
based on completed responses