

Improving primary health care through evaluation

A case study

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The situation

Northern Melbourne Medicare Local (NMML) needed a comprehensive stock take of the delivery of primary health services across their five Local Government Areas (LGAs) to inform strategic direction over the next three years. The information was required to identify gaps in programs and services, as well as opportunities to improve coordination, collaboration and the responsiveness of care.

In order to meet this need, Grosvenor was engaged to conduct extensive primary care service capacity mapping and a needs assessment for the five LGAs in NMML.

The challenge

There were three key challenges:

- primary health services are diverse with many categories of service being relevant to the review
- multiple data points were required for each primary health service
- no single source of information existed.

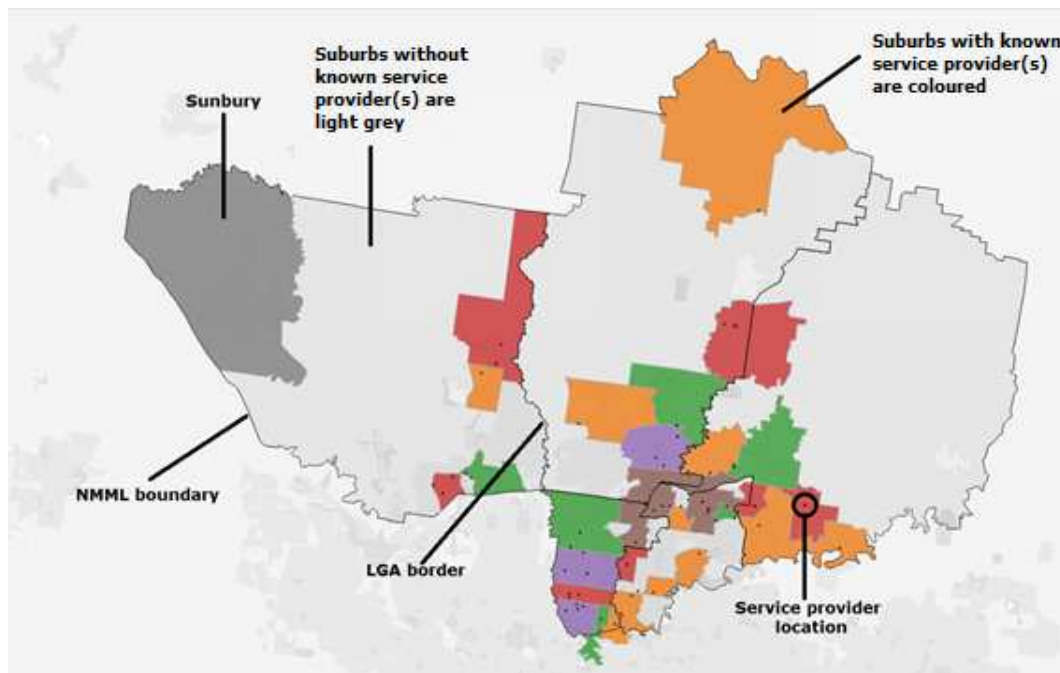
The project

Various methods and data sources were utilised to collect, collate and analyse the data required for this project. These included:

- desktop research to compile service mapping data of allied health service providers, supplemented with telephone contact or 'mystery shopper calls', as required
- desktop research to identify demographic information at the LGA and, where possible, suburb level to determine the population locations and characteristics

- distribution of an online survey to the Practice Managers of General Practices. If required, a fax friendly version was provided and hard copy responses accepted
- collation of information into data tables, using the prescribed template
- interviews and a survey with selected NMML stakeholders and partners
- collation of collected information into heat maps showing the locations of all service providers. Where possible maps were also produced to depict service providers with particular characteristics, for example, those which provide after hours services. An example heat map is included below.

Figure 1: Example heat map



Number of service providers by suburb

1	2	3	4	5	6	7
8	9	10	N/A	11	12	13
14	15					

In all heat maps, the location of each service provider (based on its GPS coordinates) was shown with a black dot. All suburbs with at least one

service provider were shaded in accordance with the legend to show the total number of services available.

By reviewing the heat maps in conjunction with demographic data for each of the LGAs it was possible to clearly identify the locations where the number and type of services aligned with the demographic needs, and the locations with potential service gaps.

A comprehensive report and deliverable set was provided detailing the results in a number of formats to optimize usability for NMML. Each deliverable/format caters to a different need or purpose, including:

- collated data, analysis and findings to support conclusions and recommendations
- raw data to enable NMML to complete additional future analysis of service coverage if required
- data collection tools and reference tables to demonstrate how data had been collected and allow NMML to collect additional data to support any future service capacity mapping.

The following table describes the range of deliverables that Grosvenor produced.

Table 1: Deliverables produced

Document name	Description
Prescribed reporting template	The prescribed reporting template was completed using data collected during the service capacity mapping exercise.
Data reference table and sources	Definitions of all terms and data categories used during data collection to support the service capacity mapping. This included terms and data categories used in the prescribed reporting template and raw data for each health service.

Document name	Description
Partner Survey questions	Questions from the online survey released to NMML partner organisations.
Partner Survey results	Results of responses by NMML partner organisations to the online partner survey.
General Practice Interview questions	Background information and questions used to collect data from General Practices during telephone interviews.
General Practice Survey	Background information and questions distributed to staff at General Practices who did not have time to participate in a telephone interview. This was adapted from the General Practice interview questions and distributed by either fax, email or through an online survey.
Raw data collected for each primary health service	A series of excel documents (one for each health service type) detailing the raw information which was collected for each provider during service capacity mapping. These sheets also included the analysis which was used to develop heat maps and assess service availability throughout NMML.
Executive Report	An overview of the information presented in the main report, including details of service availability in the NMML region and the broad conclusions which were identified from the results of the service capacity mapping exercise.
Report	Comprehensive information relating to the service capacity mapping exercise including:

Document name	Description
	<ul style="list-style-type: none"> • details of the process which was undertaken • analysis of information collected in relation to the location and availability of each health service within the NMML region • conclusions relating to the availability of health services in the NMML region.

The result

The report and supplementary deliverable set were very well received by NMML. In particular the visualisation of services on heat maps was highly useful for effective planning and decision making.

The comprehensive deliverables also enable NMML to replicate much of the analysis in future years without additional assistance.

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Dana Cross is an experienced program evaluator leading Grosvenor's program evaluation practice.

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