CASE STUDY SERIES:
ENHANCED CAPITATION

The team at Rakaia Medical Centre, which is a member of Waitaha Primary Health.

BACKGROUND

In September 2016, the way Care Plus funds were distributed to General Practice teams changed. The aim was to reduce administration and ensure general practice teams had the flexibility to provide services that matched the needs of their population, particularly those patients with complex health and/or social needs.

Under the new scheme, Enhanced Capitation, General Practice teams were encouraged to come up with their own innovative ways to apply the funding, with the only expectation being that it enhances the quality and coordination of care provided to these patients.

In this series of case studies we look at the ways some practices across Canterbury are using the funds innovatively to enhance the care provided to their enrolled population, particularly those with complex needs.

HIGHLIGHTS - CLINIC NAME

The practice team used information about their enrolled population to jointly agree on how the Enhanced Capitation funds would be spent.

The practice's older population (over 80yrs of age) were offered a free 30 minute home visit from a rural nurse specialist. During this visit, patients were advised if they were eligible for other benefits. If the nurses felt that the patients needed a follow-up appointment with a GP at the practice, it was provided free of charge.

Rural nurses undertook training to enable them to provide a wider breadth of services, such as spirometry and 24-hour Ambulatory Monitoring from the practice. This reduces the need for patient travel to Ashburton or Christchurch.

The team are currently setting up a co-morbidity clinic and are planning to invite eligible patients for two longer appointments per year. This negates the need for the patient to go back and forth for routine check-ups.

Decisions

When the change was put into place, the practice team got together to decide how the funding should be spent. They did this by evaluating their existing patient demographics and health needs and agreeing which groups would benefit most from some additional support.

With the database showing the practice had a high percentage of older people enrolled, many of whom were living alone without family nearby, it seemed a logical choice to make contact with this group.

Christine Milton, Rakaia Medical Centre's previous Practice Manager, said: "we targeted patients over the age of 80, offering them a free half hour home visit assessment. Only four of the 42 patients declined.

"In our experience this generation put on their best front to come to see a GP so we felt it was useful to see them at home and if we decided they did have to come in for a follow-up that was (offered) free-of-charge."

The patients went through a questionnaire with the nurses at the home assessment; this helped the nurses confirm what health conditions they had and what benefits they may be eligible for. During these sessions and with patient consent, the practice also invited in the fire service to carry out a fire safety checks in their home.

"We received fabulous feedback, from the patients and from their families too," said Christine. "As both GPs were new to the practice from overseas we hoped that by completing a home visit assessment we would build confidence and a sense of connection with our older population, and of course the doctors and nurses would have up-to-date information at hand on the health needs of these patients when they came to visit the Medical Centre in the future."

The initiative was so successful that the GP team will be repeating it again this year, bringing the age bracket down to over 75 year olds.

"We also used the funding to provide specialist training to our nurses to allow them to hold specialist clinics such as spirometry, 24-hour Ambulatory Monitoring, free pneumovax for our high risk patients and continue to fund a six-week post-natal visit for mums," said Christine.

Increased value

With the introduction of Enhanced Capitation, that practice team found the additional flexibility in how these funds were used extremely valuable in tailoring services around patients.

Christine comments: "It's been great to have that flexibility because it's allowed the team to be much more preventative rather than reactive.

We have created 'packages of care' to help vulnerable patients meet the costs of their medical bills; the GPs and Nurses discuss this on a case-by-case basis with the patient and family.

What's next?

In addition to repeating the home visits for the older population, Christine wants to do more to support the practice's increasingly diverse population.

"We are progressing the development of cultural welcome packs for our increasingly diverse population including Tongan, Samoan and Filipino. We think this would improve their ability to access care.

In addition, the team is in the process of setting up a co-morbidities clinic, with patients pro-actively identified and invited to attend two longer appointments a year, negating the need for more regular routine check-ups.

"The whole team is very patient focused and is happy to go the extra mile for our patients. I personally feel very lucky to work at the Rakaia Medical Centre Trust – the money we make goes directly back to patients and our community."

To find out more about these initiatives you can email Emma Jaillet-Godin at emma@rakaiamedical.co.nz