
Clinical Prioritisation Criteria (CPC): Making Triage Everyone's Business

Initiative Type

Service Improvement

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Sustained

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Summary

Clinical Prioritisation Criteria (CPC), implemented as a key component of the Government's Specialist Outpatient Strategy, are clinical decision support tools that help ensure patients referred for

public specialist outpatient services in Queensland receive appointments in order of clinical urgency. CPC represent a significant area of reform across the system by enabling and ensuring that Queenslanders get the right care, in the right place in a timely and clinically appropriate manner. Statewide development and implementation facilitated by the Healthcare Improvement Unit (HIU) within the Clinical Excellence Division has seen over 309 conditions published across 21 specialties with development ongoing. CPC are developed and validated through an extensive process led by clinicians working across the Queensland health system. Almost 600 clinicians including General Practitioners (GP's), Specialists, Nursing and Allied Health staff have been involved in the development since the initiative commenced in 2014.

Key dates

Jan 2015

Dec 2020

Implementation sites

Throughout Queensland.

Partnerships

CPC is a joint initiative led by the HIU and recognises the significant contributions of clinicians, GPs and staff across all participating HHSs and PHNs.

Key Contacts

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Aim

To implement clinical decision support tools (CPC) that will help ensure patients referred for public specialist outpatient services in Queensland are assessed in order of clinical urgency.

Benefits

- Specialist outpatient appointments that are delivered in order of clinical urgency
- Patients are ready for care at their first specialist outpatient appointment
- Improved referral and communication processes between referrers and specialist outpatient services.

Background

Australians experience some of the highest quality health services in the world. However, like all contemporary health systems, significant challenges exist. In common with other states, Queensland is experiencing a growing and ageing population, increasing chronic disease, rising patient expectations, workforce shortages and expensive advances in medical technology. The demand for specialist outpatient services has grown in recent years, and is expected to continue to rise. In this context, all efforts must be made to create and maintain equitable and safe access to specialist care. Those patients with the highest clinical need should be prioritised for care, regardless of their place of residence. Previously in Queensland, there have been no standardised statewide referral criteria to ensure equitable access to public specialist outpatient services. This has contributed to a wide variation in referral quality and clinical triage (categorisation) practices. Many Queensland Hospital and Health Services (HHSs) have been proactive in developing local referral and clinical eligibility guidelines. However, there has been minimal central coordination of these guidelines, and no consistent approach to ensuring adherence. Moreover, there has been little effective engagement with general practitioners and the Primary Health Networks (PHNs) to implement these guidelines.

Solutions Implemented

CPC have now been implemented across all major Queensland Hospital and Health Services and are playing a key function in reshaping the way that specialist outpatient services are provided in Queensland public hospitals with a focus on ensuring equitable access regardless of a patient's locality. Nearly all other States across Australia have expressed an interest or desire to implement CPC within their jurisdictions, with NSW having adopted the CPC clinical content in some of the Local Health Services.

Evaluation and Results

The implementation of CPC across the State has been a significant healthcare reform program, undertaken as a component of the State Government's Specialist Outpatient Strategy - Improving the patient Journey by 2020. The implementation of CPC has made a substantial contribution to delivering timelier, more equitable access to specialist outpatient services in Queensland public hospitals. By ensuring complete referrals CPC have delivered a major improvement in the interface between the acute and primary care sectors. Since the program's inception the HIU have led the development of over 344 condition-specific referral criteria across 21 clinical specialties. This involved one of the largest clinical consultative processes ever undertaken in Queensland. Over 800 health professionals from a vast number of professional streams were involved in developing these CPCs. To implement the criteria, unprecedented stakeholder engagement and relationship building was essential involving PHN's, GPs, HHS staff and included establishing a partnership with an industry leader, Streamliners. Streamliners were engaged in the implementation process to assist in ensuring a robust technical platform for CPC via their HealthPathways product. HealthPathways have been used for a number of years across Australia and New Zealand to support GPs regarding clinical decision making, specific to their local contexts. Other key achievements of the CPC implementation project include:

- Development of localised service directories for GPs wanting to access health care services for their patients.
- Decreasing the rate of referrals being returned to GPs for additional information, minimising the clinical and administrative burden on HHSs and GP practices.
- Development of alternative referral triage processes freeing up specialist time to enable a greater focus on providing direct clinical care.
- Better patient experiences by ensuring they have the correct diagnostics undertaken prior to their first outpatient appointment and ensuring they are ready for care.
- Establishment of a CPC website - since going live, the website has over 52,037 users with over 473,857 CPC pages viewed.
- Nearly 3,547 new localised HealthPathways have been developed and published.

Lessons Learnt

CPC are essential for Queensland to move away from a system where access to specialist outpatient services is inequitable and inconsistent, towards one where access is equitable, consistent and transparent. The implementation of CPC and HealthPathways have been catalysts for a multitude of initiatives including the HealthPathways network and alternative models of care. The improved cross sector communication among clinicians as a result of these programs has led to more efficient and innovative service delivery.

Further Reading

[Clinical Prioritisation Criteria Website Queensland Government Specialist Outpatient Strategy - Improving the Patient Journey](#)

Resources

[CPC Factsheet](#)

PDF saved 03/07/2024