

Closing the Gap Training Day and Workshop

22, 23, & 24 March 2011

EVALUATION RESULTS

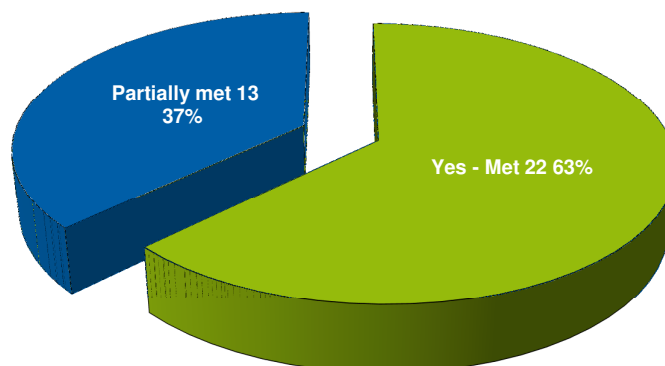
Workshop Objectives

The aim of this state-wide workshop was to provide an opportunity for Divisions to share their experiences and expertise and plan for the year ahead. There were also updates from key stake holders and opportunities to learn new skills.

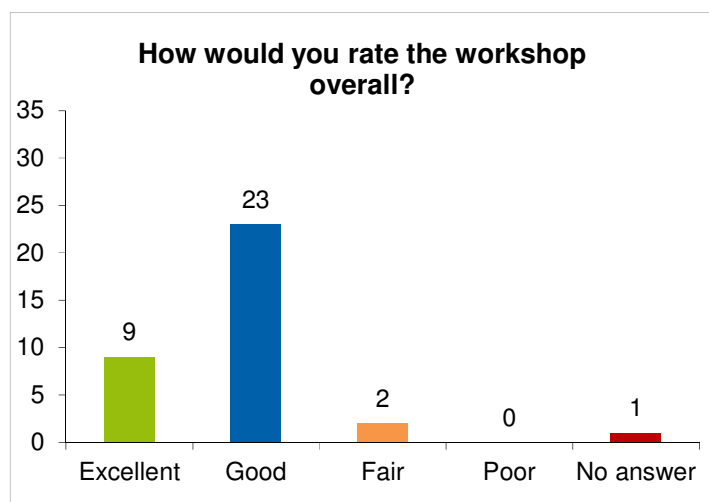
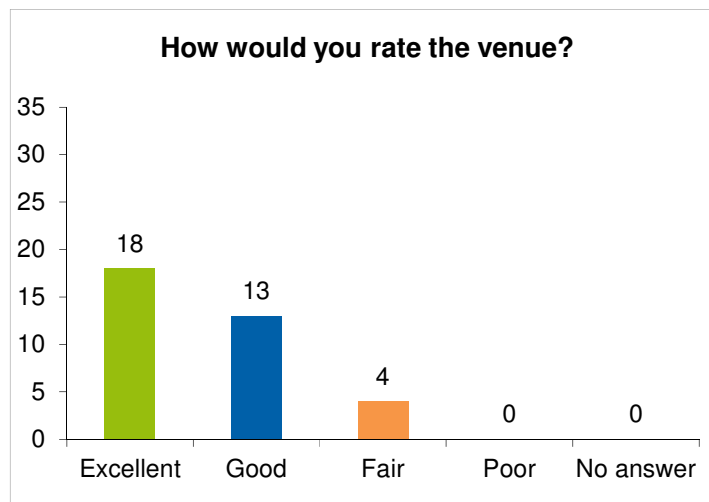
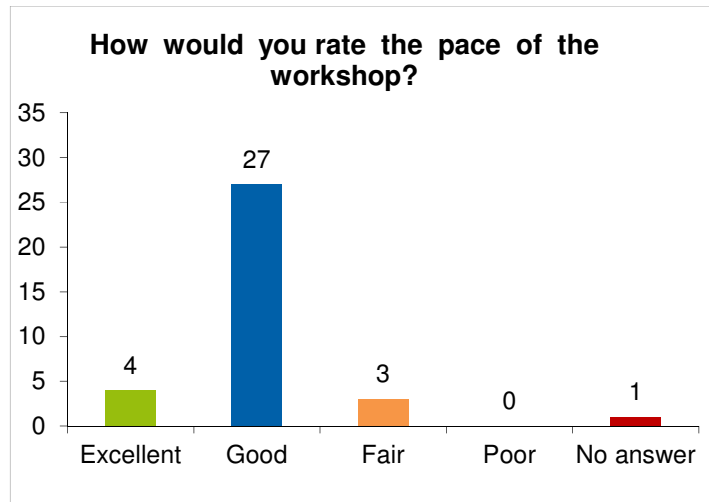
The theme of the Workshop was “Where have we been, Where are we now, Where do we want to be” and the purpose was to:

- provide training as requested in the training needs survey of Closing the Gap staff;
- provide networking opportunities for Division Closing the Gap staff;
- showcase models of Division activity in the Closing the Gap programs;
- highlight integration and collaboration opportunities;
- discuss the top issues in Closing the Gap for Indigenous Health Project Officers
- discuss the top issues in in Closing the Gap for Aboriginal and Torres Strait Islander Outreach Workers; and
- Provide Care Coordinators their first opportunity to meet.

Did the workshop meet the objectives?



Overall satisfaction with the workshop



Day 1 – Tuesday 22 March – Training Day

Participants attended – 67 (This number does not include speakers and GP NSW Staff)

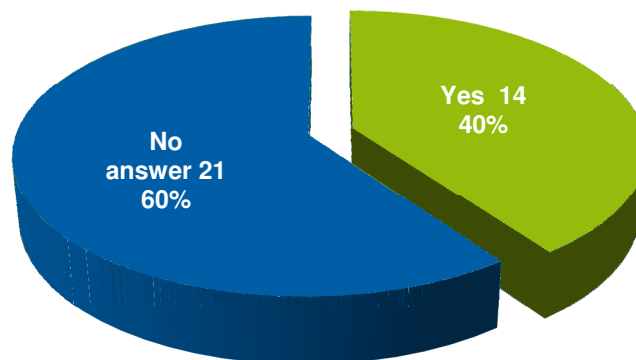
Completed evaluation – 35

Percentage completed – 52%

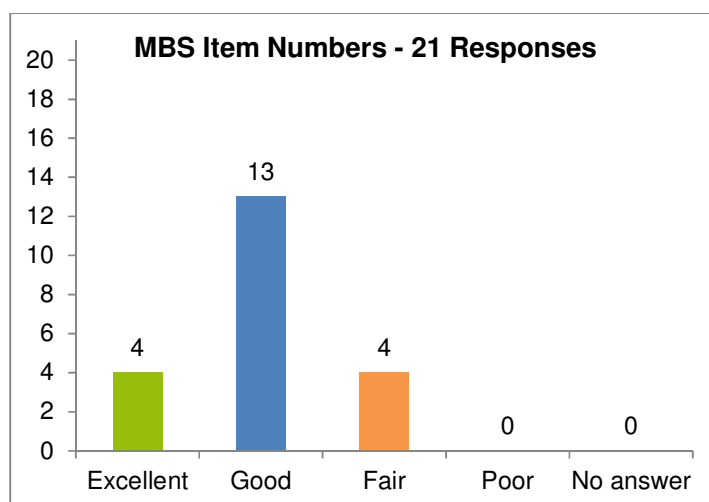


Did you find Reporting & Planning with Greg Clark worthwhile?

14 participants responded



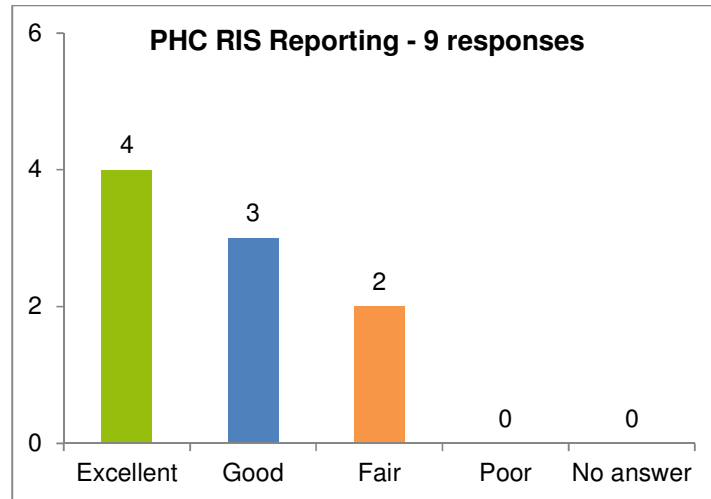
I attended the afternoon Breakout sessions



Comments:

- If a representative from Canberra Office could also be in attendance to take our considered opinions on board and maybe act on the really good ideas put forward. I would have really liked to attend both workshops as they are both relevant to my position.
- Practical tips on selling these to GPs - simple GP resources of patient flows and \$ benefits.
- It could have been an opportunity to move tables, as an ice breaker, to network with newer staff but also to get a variety of skill mix at each table.
- The sessions were VERY repetitive of previous sessions. It would be great if the guest speakers progressed at the same pace as the front line workers. Although informative, it was really covering things that had been done before.
- While it is good to be aware of what services can be accessed, a more realistic case-scenarios would be good to access all services available would have meant an appointment every week of the year. Probably unlikely that most would utilise all services due to a variety of reasons including costs.
- It needed to be more interactive so all senses are involved - the presentation needs to be emailed "live" to all participants, internet connections on phones, in hotels in computers. This information needs to get out quicker so we can pass it on to where it needs to get.

- The activity based on choosing the MBS Item Numbers for the Case Study patient - although interesting, seemed to be non-valuable as it was too clinical assessment focussed and we are merely interested in portraying the information to GPs, Reception Staff, Practice Nurses & Allied Health.



Comments:

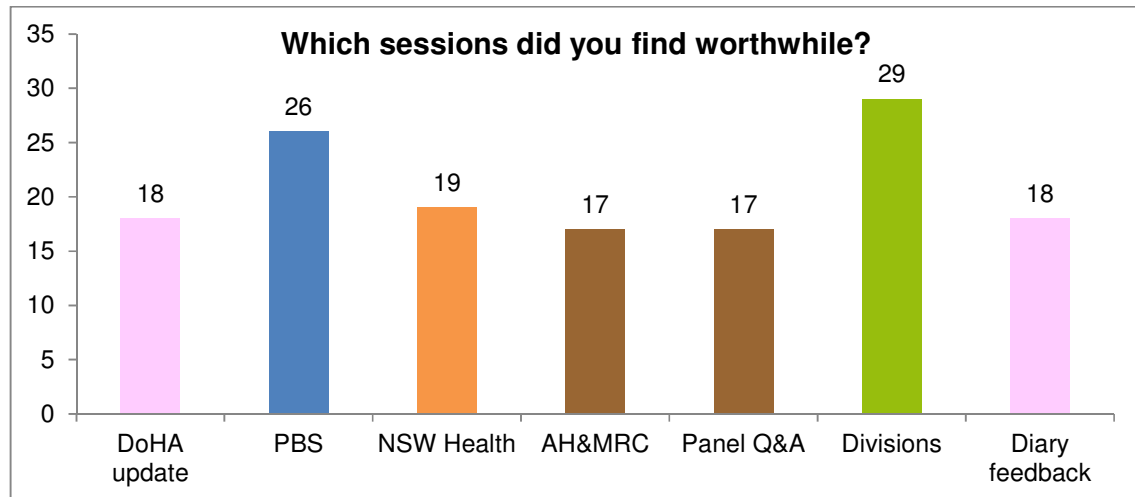
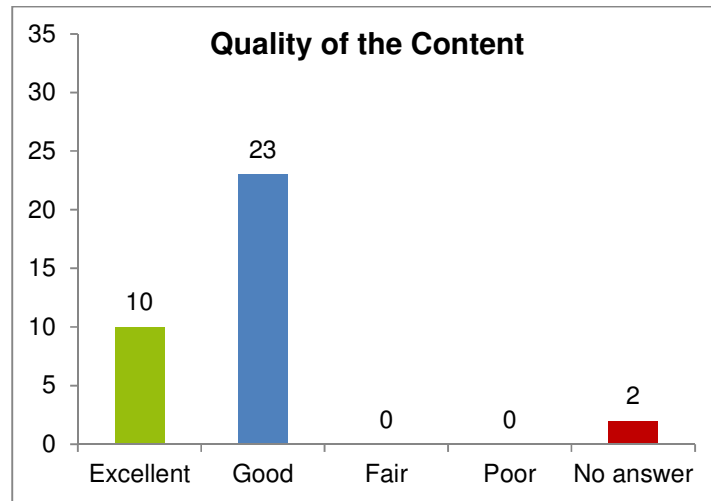
- I found day 1 was excellent for the new people to the program, but I think for more experienced people it wasn't anything new. However i still enjoyed the day and really enjoyed the PHC RIS reporting.
- Breaking the group into smaller group's dependant on the reporting experience of the project officer.
- Looking at real reports & discussing what PH CRIS want to hear.

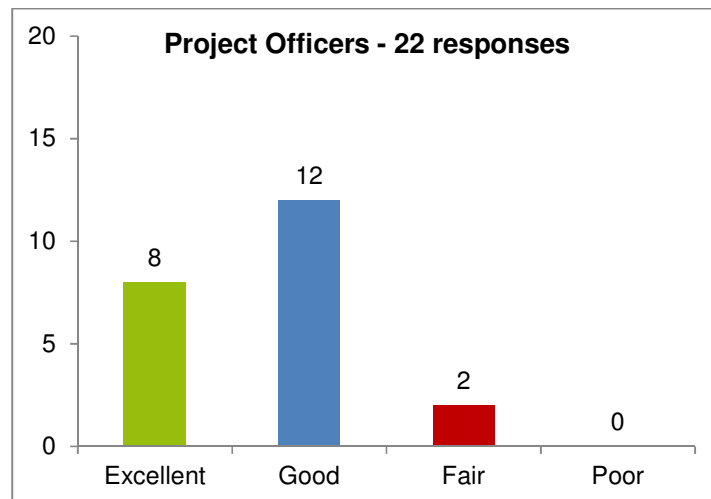
Day 2 – Wednesday 23 March 2011

Participants attended – 53 (This number does not include speakers and GP NSW Staff)

Completed evaluation – 35

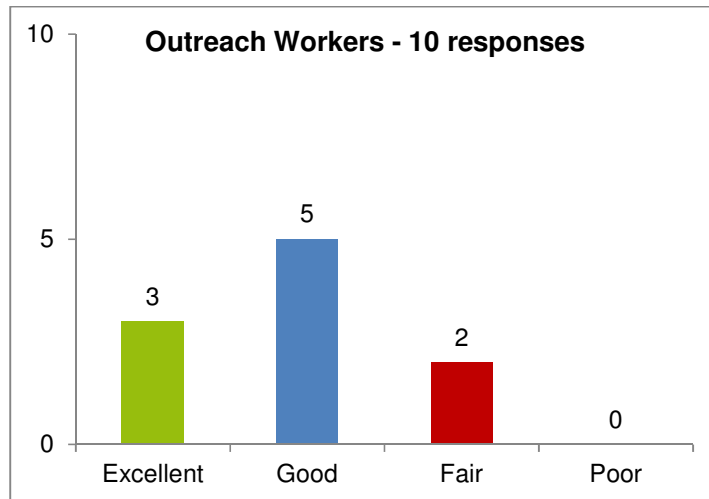
Percentage completed – 66%





How could this session be improved?

- This was a great opportunity to benchmark with other Divisions and develop new ideas for program improvement, and identify what we are doing well.
- I would have discussed more on what we are meant to be doing to reach our set KPI's, I think it turned out to be an us and them session between the Project Officers and the Outreach Workers.
- I think the diary update would have been better if more people had contributed to it. Limit to 5 points per table – summarise.
- We need more time to really discuss issues. We should be identifying issues in the weeks before the workshop and come prepared with ideas and solutions to discuss as a group, Perhaps separating into groups from Urban and Metro as we face very different issues.
- Will we receive a copy of the ideas?
- Totally a productive session!
- There did not seem to be long enough before moving onto each topic. Limit the trivia questions - good but was too long and consumed time for main session
- It would have been great to have all got up and introduced ourselves to everyone. This being my first time at the workshop and coming on my own I knew only a few people vaguely and no other IHPO well enough.. People just aired there problems rather than creating a positive and inspired atmosphere.



How could this session be improved?

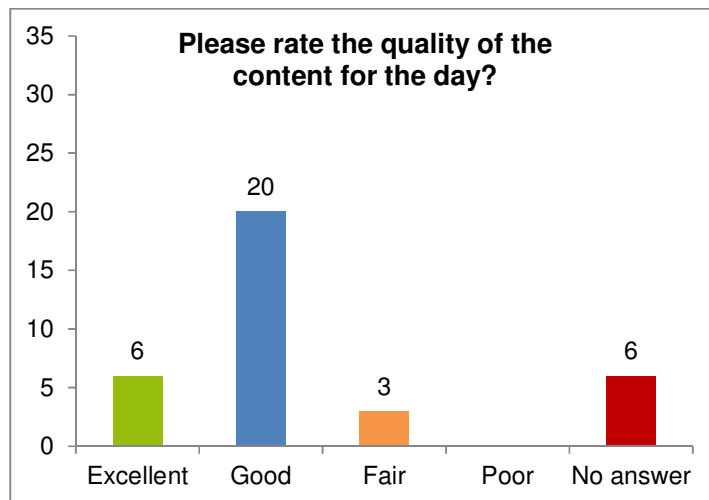
- Meet more on a regular basis

Day 3 – Thursday 24 March

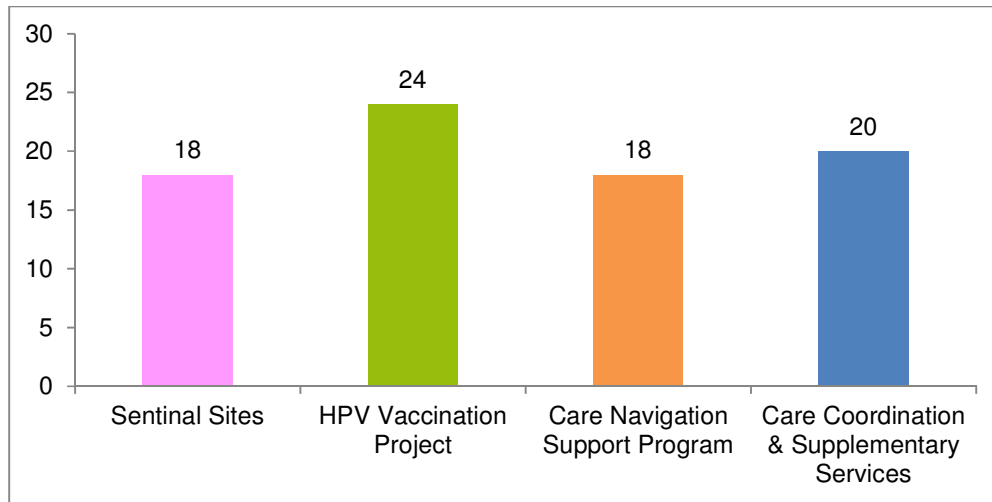
Participants attended – 49 (This number does not include speakers and GP NSW Staff)

Completed evaluation – 35

Percentage completed – 71%



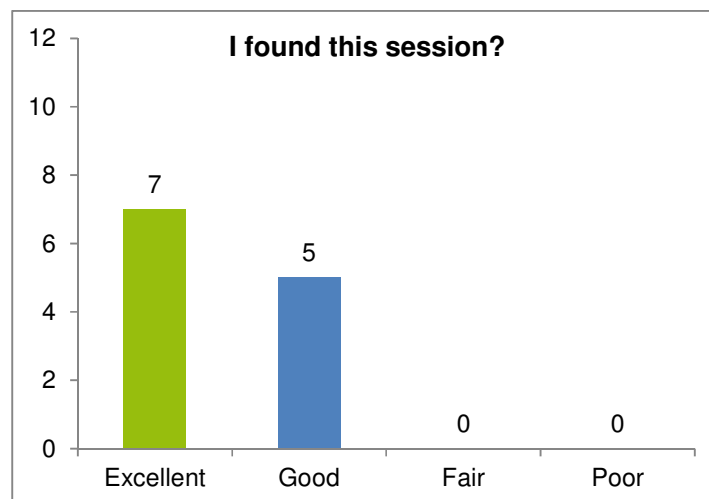
Which sessions did you find worthwhile?



How could these sessions been improved?

- Shorter days
- Thought the guest speakers were valuable time wasted. Workshops and planning would have been more beneficial!
- I enjoyed Sonya's information and the HPV project - I felt the Sentinal sites talk seemed above my head - maybe for officers who have been with the program more than 1 year.
- Some of these presentations seemed to lack purpose, or failed to successfully demonstrate why they were important to the workshop, and why the information was valuable to the CTG Project.

12 people responded that the attended the Successful Submission Writing Workshop

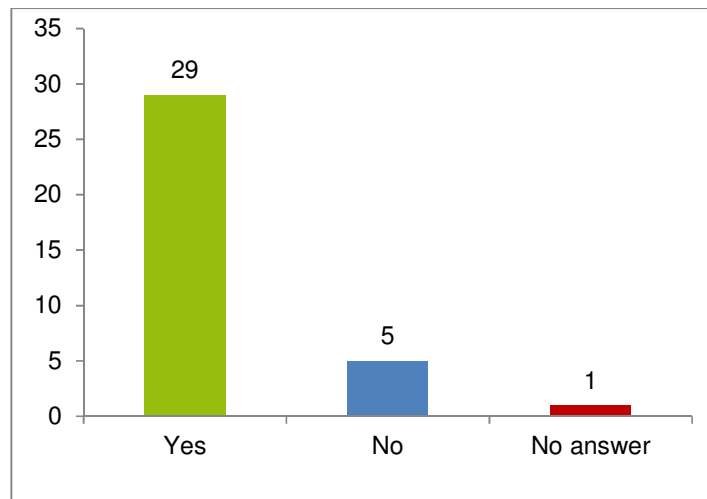


Comments:

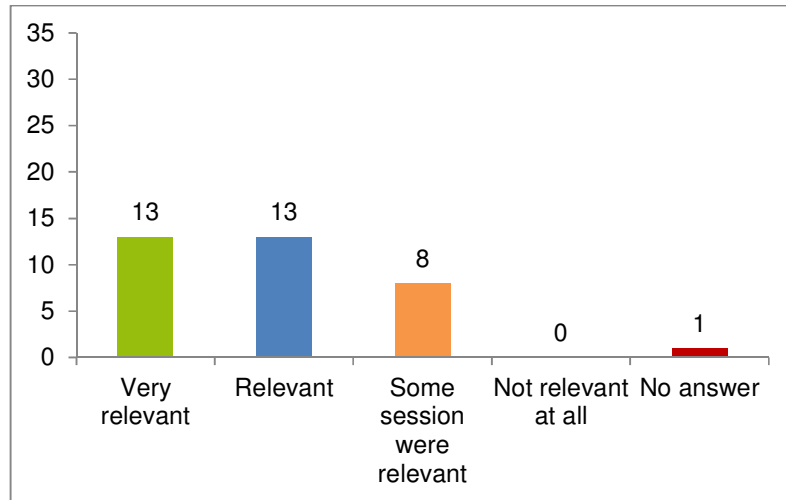
- The participants that registered for this workshop and did not attend should be ashamed of themselves. I found it highly embarrassing that the CEO could make time to assist us in area that we identified that would be useful then just not show up. I do hope this is reported back to their CEO's.
- Actually this session earlier in the piece would have been great. Most people left at this point and they would have got a lot out of it!
- Like the session very much and would like to see it again in the next workshop.
- I enjoyed the Successful Submission Writing Workshop; it was particularly good due to the smaller number of attendants and the casual style of presentation.

General Questions

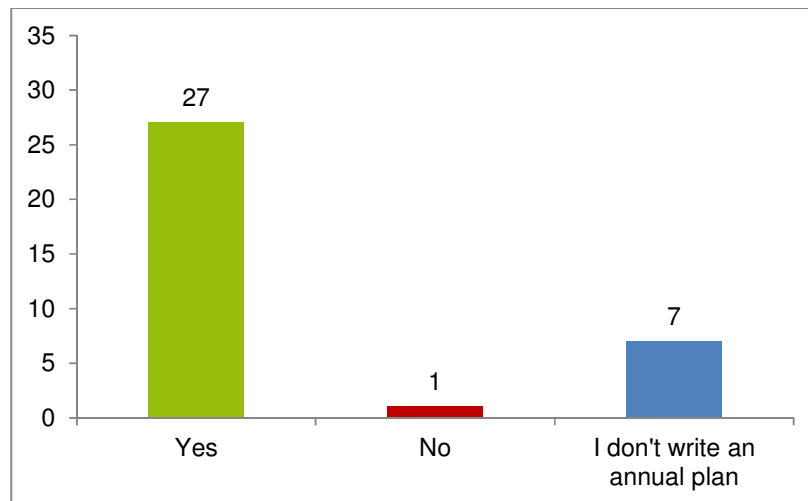
Did the workshop provide enough time to talk to one another; to network?



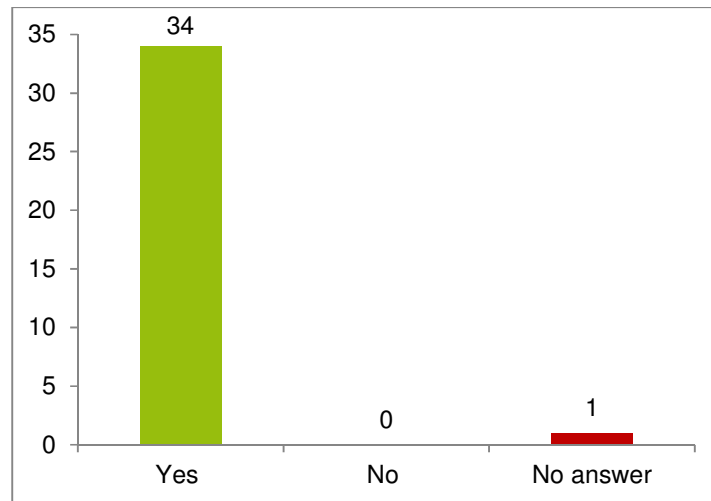
How relevant was the workshop to your work?



Do you feel the information presented and discussed at the workshop will be useful in your annual planning?



Will you discuss the content of the workshop with your colleagues?



What aspects of the workshop did you find most valuable?

- Being able to talk to other divisions and hear stories of what they have implemented or have planned.
- Also loved the activities! Thanks guys :)
- What other Divisions are doing in their local boundaries Re: self identification, CtG initiatives & support, advertising through local papers, radio and TV advertising and networking with other Divisions and meeting new workers and other service providers and staff from GP NSW
- Aboriginal Outreach Workers Session
- Day One and on Day Two the Panel Session was great for obtaining the correct information off the people/organisations that they represented.
- division presentations and sharing resources
- Opportunity to network and share resources and ideas.
- Networking sessions and presentations from other Divisions.
- networking, being able to access people face to face
- The opportunity to network, meet & talk to other IHPO's
- The interaction and planning with the other Division Staff

- Showcasing of what other divisions are doing & session looking at key issues and sharing solutions.
- I found the "Training Day" very useful & Also the Divisions presentations > I thought the combination of training & sharing extremely useful
- Networking with other DGPs
- I enjoyed the division's presentations, seeing what other people have been up to was really interesting. Care Navigation Support Program was really good as I did not know they existed.
- To know that Greg Clark found the reporting on the contracts confusing like the rest of us. I liked Elizabeth Goodfellow's Indigenous Access Program. I found the PBS co-payment session with Long Dang good but that fact that general practice has to be PIP registered before a CTG script can be given is unbelievable!! Any doctor that has a provider number should be able to write a CTG script - why is important that the surgery's interest in PIP be a criteria - don't get me started!!
- IOW session
- Putting faces to names, networking, learning about PHCRIS, reporting requirements, DoHA, presentations from Divisions
- The presentations from the divisions were particularly interesting and provided some of the most valuable information in the form of successful ideas and activities.
- The PBS Co-Payment presentation was particularly interesting, and so was the discussion of the Medicare BDO's by Elizabeth Goodfellow. These both demonstrated interesting information which was relevant and applicable to the CTG Project.
- The attendee contact list was also a valuable resource from the workshop.
- The coffee. Fantastic Coffee!
- Meeting the other Aboriginal Outreach Workers
- Hearing what other divisions are doing. PBS presentation. Project officer group sessions, PCHRIS workshop
- For my first workshop it gave me a great overview of the other divisions and enabled me to gauge the progress of my division in rolling out CTG information to GP's and communities.
- Submission writing was very well presented and very informative

What aspect of the workshop did you find least valuable?

- Early morning starts
- Most of day 3
- The round table sessions; each Division is working differently. Felt like I couldn't contribute as my Division would approach areas differently to others and vice versa.
- Back to back theory based presentations eg: MBS PBS co pay and DOHA Medicare update, - need to focus on practical slideshow content so just blocks of text
- PHCRIS reporting was pitched only for newbie's.
- PHCRIS - quite disappointing
- Some of the sessions were a bit repetitive as I felt that we had covered a lot of these in August last year, however, I understand that there were quite a few people new to their role(s) and revision is always good.
- Guest speakers - boring and unrelated to the hands on job.
- Planning the year ahead. This one could have had more structure- most in our group did not know where to start. Other groups apparently found quite frustrating also.
- All were valuable at some level-even if it was to review what I am doing through different experiences
- Trivia - even though this did facilitate networking with DGP reps; it was a little too long and consumed time for the main part of the session.
- I have been to many of these workshops and it was most valuable to my new IOW, but for me I feel fairly confident in performing my role as I have been previously well supported by GPNSW and feel empowered to do the job well.
- Greg Clark from Doha was the least valuable.
- Not interested to know that a doctor can get \$2,283.20 per patient for CDM work - it should not be about financial gain!
- PBS, however I know that many other people found this to be very good.
- It was quite a long workshop, three days was extremely exhausting, however for the majority the information was interesting, and relevant.
- All was valuable and relevant in its own way
- A few of the presentations seemed to be the same as last year

What topics would you like covered in future workshops?

- identify and implement policies and procedures
- Case notes and documentation (recording client information). Legal requirements??
- Advocacy and support letters for clients when needed to assist with Housing etc.
- happy with all topics, maybe in the future provide the opportunity for a community member/s that has undertaken the 715 Aboriginal Health Check and has a Chronic Disease their pathway through the delivery of Allied Health referrals TCA's and GPMP their response/s to been asked the question about identity support from IOW's practice staff
- Basic Cultural Awareness Training and Protocols for everybody. The way that some of the presentations from other Divisions were "cringe worthy" in this aspect.
- GP sales
- more on integration of indigenous health into division strategic planning
- IHPO focussed training.
- Planning
- Training options for IHPO's - maybe presentations from those who have undertaken further training since commencing in their role.
- Integration of services & partnerships for the future, sustainability of the IHPO - such as the opportunity to be involved in the HPV data collection as presented by NCIRS -I see this as a really positive way to work more closely with General Practices, AMS' & the Local Health Network & it reintegrates the need for good data collection around ATSI identification. I think that is a great example of "Where to now". Once the Practices are signed up & given that the role of the Medicare Business Development Officers seems to be moving more into General Practice to support staff around item numbers & software. I believe that this provides scope for the IHPO's to move into ATSI health at another level.
- More planning workshops so there is a unified front shown from all Division on Closing the Gap
- Repeat sessions showcasing divisions approach to program delivery and the other session on key issues (as these will change and evolve) and problem solving potential solutions.

- Would also like to see integration to include how evolving into a Medicare Local will impact on program and info from Allied health and Pharmacy associations about relevant issues so that we can adequately support them as a part of the CtG program, including existing networks and associations for communication with allied etc.
- Health Assessments
- More presentations from DGPs and opportunities for information sharing
- Some more about other divisions should definitely stay. I really like the presenter in August 2010 with Mrs Fury. It was really motivational and interesting.
- I think there should be a "newbie" introduction workshop to what is expected from us as IHPO's etc and then the 2nd workshop of the year is for the experienced IHPO's etc
- Sane
- Discussion around EPC - has been a strong theme coming through from discussions with Allied Health and results in some confusion.
- Resource development.
- Roles of Aboriginal Outreach Workers and how different they are in relation to the area that they are covering
- Self identify major problems with it and for our people when stats come in it will be a major concern I believe
- A presentation on the progressive breakdown of Aboriginal people accessing the Health checks from 2010 until the next workshop on a division basis.

Do you have any comments relating to any aspect of the workshop?

- I think 3 days is too long. I would suggest an extra day for any new people to the program to cover basic PBS information; otherwise i think 2 days would be enough time to cover any updates and presentations.
- No workshop was great food was great support from GPNSW staff as always was great, keep up the great work
- Make the last day shorter, so that everyone catching trains planes and buses can leave by lunch.
- The rooms at the Menzies were mouldy; I had to move twice to find a room that wasn't musty smelling or mouldy. The service and the food was excellent.

- participants can list 5 areas they need help with in their roles at beginning of workshop or questions they have and give to each table to answer or generate discussion
- I loved the trivia activities especially after lunch when everyone gets tired, it woke me up.
- It was refreshing to see that as a collective group, we have really grown & are more supportive of each other. I believe that the majority of the Aboriginal IHPO's are now taking the lead in providing cohesion & support to the whole group...it's so good to have moved on from the negatives.
- Yes - I thought SOME staff at the Menzies were very rude to a number of our guests. This did not happen at the previous workshops but was very apparent this time. Although other staff at the Menzies were more than helpful. I thought GP NSW did a great job again and time was probably your enemy. I was also a little bit disappointed that there was no performance for CTG Day and that we did not really do anything bar display promotional material.
- A good workshop which has provided me with useful ideas and solutions to take back and integrate into the delivery of the program in our Division.
- This workshop was a huge improvement from previous CtG workshops. Comradeship has improved amongst PO's since the departure of some of the previous PO's that have been vocal and negative about the initiative.
- The accommodation at The Menzies was sub standard, the rooms were very small and dirty, I could not see out the window in my room! The lunches were great but the morning teas not so good, not enough fruit for everyone, so first in best dressed.
- The accommodation at The Menzies was sub standard, the rooms were very small and dirty, I could not see out the window in my room! The lunches were great but the morning teas not so good, not enough fruit for everyone, so first in best dressed.
- I always feel very welcome when I come to visit GP NSW, and I thank you guys for this.
- GPNSW are a great team and worked tirelessly before during and after the workshop, congratulations.
- No one told me exactly/specifically what my job is as IHPO and the workshop could be a place that affirms what we are told in our divisional jobs is what we are supposed to be doing depending on how many hours a week we are employed/contracted to be IHPO's i.e. what do I do with a job that is only supposed to be 1 day a week? As compared to 5 days a week to do a job?

- It was a worthwhile workshop and I feel a lot of workers benefited and came away with a bit more knowledge on their role as an IOW.
- Enjoyed all aspects of the workshop could find no faults
- It would also be beneficial to receive more tangible resources from the workshop... whether it is presentations either in PDF format on discs or printed resources.
- It would also be best to perhaps have to network drinks, or two scheduled networking nights to allow a greater opportunity to connect with other divisions.
- Will the notes from the session planning for the year ahead be posted on the website as I missed this session
- Overall a very worthwhile activity which gives all division workers an opportunity to receive the latest information from a variety of agencies, also a chance to network, exchange information and ideas.
- More time to network with other Outreach Worker would be ideal as we could tell each other what we are doing within our communities.
- Thank you