| QI Goal | Plan | Outcomes | PDSA |
| --- | --- | --- | --- |
| What activity was undertaken | Refer to PDSA for activity | Record results | Yes/No Link to document |
| **Goal:** Increase staff and patient safety by implementing COVID-19 social distancing and infection control guidelines.  **Measure:**  Completion of the Commonwealth COVID-19 infection control training.  Implementation and review of physical alterations to accommodate social distancing guidelines.  Regular safety audits against the RACGP checklist ‘Keeping your practice COVID-safe‘, demonstrating that practice safety is maintained. | * Prepare for COVID-19 outbreaks.   + Review practice safety as a team and audit for areas that need attention by filling out the [RACGP Checklist Keeping your Practice COVID Safe](https://hnc.org.au/wp-content/uploads/2020/05/RACGP-Keeping-your-pratice-COVID-safe-checklist.pdf) in conjunction with the [RACGP Infection Prevention and Standards 5th edition](https://hnc.org.au/wp-content/uploads/2020/05/RACGP-infection-prevention-control-standards.pdf).   + Set a review date for regular audits to check you are maintaining safety at your practice.   + Scope and implement improvement ideas such as: setting up remote logins for clinicians, ensuring plentiful supply of hand sanitiser and PPE and rostering A and B teams to ensure business continuity should a staff member test positive to COVID-19. * Allocate protected time for staff to do the online infection control training. * Trial physical adjustments to the practice. * Review physical and infection control arrangements at regular ‘COVID-19 staff and patient safety huddles’ (these could be brief weekly 5–10-minute check-ins to ensure things are working) or via suggestions and advice to the person coordinating the response for your practice. | * Number of staff completing the Commonwealth COVID-19 infection control training. * Implementation and review of physical alterations to accommodate social distancing guidelines. * Number of safety audits against the RACGP checklist ‘Keeping your practice COVID-safe‘, demonstrating that practice safety is maintained. | Yes  No |
| **Goal:** Provide influenza vaccinations safely during COVID-19 pandemic  **Measure:**  Infection control measures are in place.  Number of patients immunised over 65yo, that have diabetes or COPD over activity period | In order to prevent the potential spread of infection while vaccinating for influenza and COVID-19, it’s time to review and improve your procedure from last year and put systems into place to maintain social distancing and infection control.   * Read the [Influenza Immunisation HealthPathway](https://westvic.communityhealthpathways.org/52701.htm) and the [COVID-19 HealthPathway](https://westvic.communityhealthpathways.org/723535.htm) * Check [immunisation update and COVID-19](https://www.youtube.com/watch?v=_-0oL9dSW4A&ab_channel=WesternVictoriaPHNLEARN) and training available through WVPHN Learn. * Measure baseline immunisation rates using Pen CAT tool to [identify patients at risk for influenza with predisposing conditions](https://help.pencs.com.au/display/CR/Identify+Patients+at+risk+for+influenza+with+predisposing+conditions). * Discuss and brainstorm ideas for safe delivery of vaccination under pandemic conditions, considering surgery layout and other possibility i.e outdoor vaccine options * Discuss and brainstorm ideas for prioritising immunisation for risk to high-risk groups.   Formalise a consistent communication pathway to community members re:- vaccine delivery. | * Infection control measures are in place * Immunisations were given to:   XX patients over 65.  XX diabetic patients.  XX COPD patients.  Use these recipes to pull data:  [QIM 4 – Influenza immunisation for patients aged 65 and over - CAT Recipes - PenCS Help](https://help.pencs.com.au/pages/viewpage.action?pageId=47317113)  [QIM 5 – Influenza immunisation for patients with diabetes - CAT Recipes - PenCS Help](https://help.pencs.com.au/pages/viewpage.action?pageId=47317125)  [QIM 6 – Influenza immunisation for patients with COPD - CAT Recipes - PenCS Help](https://help.pencs.com.au/pages/viewpage.action?pageId=47317135) | Yes  No |
| **Goal:** Reduce face to face appointments and increase telehealth appointments where appropriate.  **Measure**: Number of telehealth appointments over the period | The COVID-19 pandemic has brought both challenges and opportunity.  While physical access to the practice may be restricted, MBS telehealth item numbers have opened up for the first time in primary care. There is both a need and opportunity to:   * Visit [HealthPathways](https://westvic.communityhealthpathways.org/) and review telehealth guidelines, considerations and links to WFD available. * Meet with staff and develop a procedure to book telehealth appointments vs face to face. * Discuss with GPs whether they are comfortable to do telehealth and offer training if required * Review software and hardware available to practice and upskill any staff that require it. * Look at identifying chronic disease patients and maximise telehealth to assist with; review chronic disease self management and sick day action planning; add COVID-19 precautions to care planning.   Enable older patients to video conference where possible and include their families and/or carers as appropriate. | We achieved XX telehealth appointment over the period.  You can obtain this figure by doing a date range (visits) search over the period, then looking under this tab: [MBS Telehealth and Nurse Practitioner - CAT GUIDES - PenCS Help](https://help.pencs.com.au/display/CG/MBS+Telehealth+and+Nurse+Practitioner)  Practice Facilitators can assist with this as there is not a specific recipe | Yes  No |
| **Goal:** Increase chronic disease care planning and review by telehealth, by identifying patients who could benefit from GPMP/TCA and recalling patients with GPMP/TCA for review.  **Measure**: Number of GPMP/TCA created or reviewed to 30 September compared with similar period last year. | * Use the [example workflow](https://hnc.org.au/primary-care-impact-topics/chronic-disease-care-planning-via-telehealth-workflow/)  to create a workflow for your practice, including:   + Team planning, see [Co-designing Team Based Care with Dr Tony Lembke (12:33 min)](https://practicecoach.com.au/impact/)(scroll down when you reach the page).   + Integrating video consultation into your business flow   + Patient selection   + Obtain an access code from your Practice Facilitator for free access to the full Medicoach learning module [Engaging Planning and Coaching with your patients via Telehealth (67:57mins)](https://medicoach.com.au/courses/engaging-planning-and-coaching-with-your-clients-via-telehealth/)   + [Chronic disease management guidelines in HealthPathways](https://westvic.communityhealthpathways.org/76752.htm)   + [MBS item numbers and billing](https://hnc.org.au/wp-content/uploads/2020/04/20200507-CD-billing-summary.docx) * Review chronic disease self-management and sick day action planning. * Add COVID-19 precautions to care planning. * Enable older patients to video conference where possible and include their families and/or carers as appropriate. | # of those created or reviewed | Yes  No |
| **Goal:** Obtain patient feedback pertaining to how the practice is going during the pandemic  **Measure:**   * Number of surveys received * Number of positive responses |  | # of surveys  # of positive responses | Yes  No |
| **Goal:** Improve preparation of emergency equipment  **Measure:**  Results of emergency equipment, stock and expiry date audits. | * Assign a staff member to complete regular audits of your practice’s emergency and response kit. Record and compare results each audit. * Create and personalise your own audit sheet, recording stock levels and expiry dates. Consider having a digital copy to easily refer to. |  | Yes  No |
| **Goal:** Improve cold chain management of vaccines  **Measure:**  Results of National Vaccine Storage Guidelines [Vaccine Management and Storage Audit](https://hnc.org.au/wp-content/uploads/2021/02/national-vaccine-storage-guidelines-strive-for-5-appendix-2-vaccine-storage-self-audit_0.pdf). | * Perform the [self-audit](https://www.health.gov.au/resources/publications/national-vaccine-storage-guidelines-strive-for-5-appendix-2-vaccine-storage-self-audit) to obtain a baseline measure and identify a core team to meet regularly to monitor how your system is performing. Use the audit to record your progress. * Delegate roles and responsibilities — roster one person each day to have cold chain management and administration as their primary responsibility. * Develop a system for labelling vaccines to ensure all staff can locate the vaccine quickly and minimise cold chain breaches. [See example here.](https://hnc.org.au/wp-content/uploads/2021/02/IMG_3173-scaled.jpg) * Perform your ‘slush test’ before vaccines arrive and mark vaccine fridges with [‘Stop. Do not open door until you know which vaccines you need and where they are located’](https://www.health.gov.au/resources/publications/national-vaccine-storage-guidelines-strive-for-5-quick-reference-guide-poster)poster. * Display the [Cold Chain Breach](https://www.health.gov.au/resources/publications/national-vaccine-storage-guidelines-strive-for-5-cold-chain-breach-protocol-poster) poster prominently near the vaccine fridge.   Label power points “Do not unplug – vaccine fridge”. Stickers can be ordered online from Australia Department of Health – [National Vaccine Storage Guidelines “Strive for 5” – Sticker 1](https://www.health.gov.au/resources/publications/national-vaccine-storage-guidelines-strive-for-5-sticker-1). |  | Yes  No |
| **Goal**: Increase or maintain the capacity of frontline staff to manage anxious or demanding patients during the COVID-19 and influenza vaccination rollouts.  **Measure:**  75% of frontline staff report increase capacity to manage anxious or demanding patients. [See sample survey as an example measure.](https://hnc.org.au/wp-content/uploads/2021/02/20210217-Survey-staff-capacity-and-well-being.docx) | * Use meeting time to construct a unified organisational response to challenging patients that is agreed and understood by all team members, including: * zero tolerance to abuse and swearing. * roles and responsibilities for debriefing and supporting staff who experience abuse. * who reception staff can refer patients to, to provide reassurance on vaccine safety. * Use mock scenario sessions to practice dealing with challenging patients and exercise compassionate communication skills. * Brainstorm ways the team can support each other to engage in self-care and maintain wellbeing. * Survey staff monthly and check in confidentially with staff reporting low capacity to manage anxious and demanding patients. |  | Yes  No |
| **Goal:** Delivering Phase 1B COVID-19 vaccination in general practice  **Measure:**  We will measure the number of vaccinations given at our clinic to the patient population stipulated | 1. Discuss at all staff meeting and obtain a consensus on approach to project. Form a QI team and lead, discuss workflow and allocate roles & responsibilities. 2. Prepare a plan around administering the COVID-19 vaccination including clinic workflow. 3. Staff Training:      * Scope amongst nursing staff who may want to upskill and undertake Nurse Immuniser training * Ensure appropriate staff are registered to attend the ‘Infection prevention and control for general practice’ AND ‘Project ECHO series for COVID-19 hosted by WVPHN * Stay abreast the release of the AstraZeneca Department of Health training, when released ensure all staff members providing the vaccination complete when available, for more information please visit:   [COVID-19 Vaccination Training Program | Australian Government Department of Health](https://aus01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.health.gov.au%2Finitiatives-and-programs%2Fcovid-19-vaccines%2Fcovid-19-vaccination-training-program&data=04%7C01%7Csbond%40murrayphn.org.au%7Cc9f22502ed7d4764ffe308d8cd4dcbd1%7C7f4e9af6d2a8459f91a6b45d829cd58a%7C1%7C0%7C637485081322496680%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C1000&sdata=g0qf%2B08lSM0%2F3nga5rOLwCnt4QyOB0vpCfYPqUsZYpQ%3D&reserved=0)     1. Ensure your practice and appropriate staff are trained in utilising the Australian Immunisation Register. See your Practice Facilitator if assistance is required. 2. Ensure policies and procedures around cold chain management, vaccination, infection control, etc. are up to date and communicated across the appropriate team.   Information on HealthPathways, WVPHN and RACGP website may be useful:    [HealthPathways](https://westvic.communityhealthpathways.org/13454.htm)  [Immunisation - WVPHN](https://westvicphn.com.au/health-professionals/health-topics/immunisation/)  [RACGP - COVID-19 resources](https://www.racgp.org.au/clinical-resources/covid-19-resources)  [RACGP - COVID-19 vaccine information for GPs](https://www.racgp.org.au/clinical-resources/covid-19-vaccine-resources/news-and-updates/covid-19-vaccine-information-for-gps" \t "_blank)    Or contacting your accreditation body for templates and assistance:  [Login to your AGPAL accreditation hub | AGPAL](https://www.agpal.com.au/login/)  [Quality Practice Accreditation](https://www.qpa.health/) |  | Yes  No |
| **Goal:** Increase recording of smoking status for patients over 15.  **Measure**:  CAT4 increased % of patients over 15 with smoking status recorded. | Refer to [PDSA](https://westvicphn.sharepoint.com/:w:/s/WestVicPHN/Primary%20Care/EdCynVMSgUdQmg8_YJFa57sBPvq0GAvn50YORTPF-jnElg?e=9L5bMD) for more detail | Utilise CAT4 to measure percentage of patients with no smoking status recorded prior to activity and again post activity.  Recipe here: [QIM 2 – Smoking Status - CAT Recipes - PenCS Help](https://help.pencs.com.au/pages/viewpage.action?pageId=47317090) | Yes  No |
| **Goal:** Increase recording of alcohol status for patients over 15.  **Measure**:  CAT4 increased % of patients over 15 with alcohol status recorded. | Refer to [PDSA](https://westvicphn.sharepoint.com/:w:/s/WestVicPHN/Primary%20Care/EYRI3rc7NzFbgKUqFfMO5y0BMjVBgFYRG50HwuKOfjVTdA?e=8xR1oI) for more detail | Utilise CAT4 to measure percentage of patients with no alcohol status recorded prior to activity and again post activity.  Recipe here: [QIM 7 – Alcohol status recording - CAT Recipes - PenCS Help](https://help.pencs.com.au/pages/viewpage.action?pageId=47317145) | Yes  No |
| **Goal:** Increase recording of BMI for patients over 15.  **Measure**:  CAT4 increased % of patients over 15 with BMI recorded. | Refer to [PDSA](https://westvicphn.sharepoint.com/:w:/s/WestVicPHN/Primary%20Care/EVPEvANCly9PlINasgJuSQABnrOG6hHC5vmDZ1toobXp4A?e=Sht9NE) or [toolkit](https://westvicphn.sharepoint.com/:b:/s/WestVicPHN/Primary%20Care/Eaaufqpr5AFIuGfR5RRzRxkBKlZBUBL28g-BlYWHdyp1Mw?e=c9yunO) developed for activity. | Utilise CAT4 to measure percentage of patients with BMI recorded prior to activity and again post activity.  Recipe here: [QIM 3 - BMI](https://help.pencs.com.au/pages/viewpage.action?pageId=47317101) | Yes  No |
|  |  |  | Yes  No |
|  |  |  | Yes  No |
|  |  |  | Yes  No |