



General Practice

Quality Improvement Toolkit

The COVID-19 Vaccination Toolkit

This Toolkit provides a practical guide for general practice teams. It describes how to successfully implement a COVID-19 vaccination program in a practice as a CQI activity.

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Gold Coast Primary Health Network would like to acknowledge and pay respect to the land and the traditional practices of the families of the Yugambah Language Region of South East Queensland and their Elders past, present and emerging.

Artwork: Narelle Urquhart. Wiradjuri woman.

Artwork depicts a strong community, with good support for each other, day or night. One mob.

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The COVID-19 Vaccination Toolkit

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About the COVID-19 Vaccination Toolkit

To successfully meet the unprecedented challenges of the COVID-19 pandemic, a co-ordinated vaccination program is required. General practice has an essential role, as the majority of vaccines will be delivered in primary care settings.

The Queensland Government aims to vaccinate every eligible Queenslanders who consents to be vaccinated before the end of 2021 (n=±4,000,000 people). The required effort, resources, and clinical capacity are huge; it has been estimated at five times the work of the annual influenza vaccination program.

The COVID-19 vaccination program requires continual quality improvement (CQI) to ensure efficiency, effectiveness, consumer satisfaction and mitigation of patient safety incidents. It is a suitable topic for several potential QI activities that would also fulfill the requirements of CPD and PIP QI.

This Toolkit provides a practical guide for general practice teams. It describes how to successfully implement a COVID-19 vaccination program in a practice as a CQI activity.

Aim of the toolkit

To provide a simple and practical guide for general practices to implement the COVID-19 vaccination program as a CQI activity.

The Toolkit supports general practice teams to:

- successfully implement a COVID-19 vaccination program
- make best use of practice data
- document the COVID-19 vaccination program implementation and delivery as a CQI activity
- use the CQI activity for PIP QI and CPD purposes
- make measurable and sustainable improvements in a feasible manner to patient care
- increase their knowledge of CQI principles and practical application

Benefits of using the toolkit

The toolkit provides:

- A structured, easy and quick approach to implement quality improvement activities.
- A step by step guide.
- Suggestions to identify suitable patients using data extraction tools.
- Links to prefilled templates and resources.
- This Toolkit is especially relevant to the Gold Coast context, the toolkit framework was developed because it was developed by GCPHN staff, in consultation with the Primary Health Care I Improvement Committee.

How to use the toolkit

There are six steps to implement the COVID-19 Vaccination as a CQI activity

STEP 1 Planning and preparation

STEP 2 Use data to set goals and identify suitable patient

STEP 3 Implement improvement actions

STEP 4 Regularly review your CQI activity

STEP 5 Sustain and maintain improvements

STEP 6 Document your CQI activity



Step1 - Planning and preparation

1.1 Team meetings

- To meet [PIP QI requirements](#), you must demonstrate that you have undertaken your CQI activity as a team.
- It is important at the beginning of the CQI activity to arrange a practice meeting to agree, plan and prepare for its implementation. If it is not possible to have the whole team meet, each staff group should be represented. As a minimum, this would include a GP, the practice manager, a member of the administrative team and a practice nurse. In smaller practices, the same individual may have more than one role.
- You should continue to meet regularly to plan and review your CQI activities. It is especially important to meet at the conclusion of the activity and finalize the documentation.
- Meetings can be virtual or in person and can be scheduled at any time that suits the team, i.e. during or outside normal working hours.
- Practical considerations for your meetings:
 - o You could add CQI as a standing agenda item on your usual team meetings; or you could set up specific meetings for this purpose.
 - o Schedule meetings with advance notice to ensure key team members can attend
 - o Examples of practice meetings and templates are available [online](#).
 - o Ensure that you have access to CAT4, Primary Sense™ or other practice data during meetings to inform your discussions and to support your planning and review of your CQI activity.
 - o Consider using a [CQI activity template](#) during meetings to help guide the discussion and to document your plan, progress and learning. There is also a [guide](#) to assist completing this.



TIP - Regular meetings help to maintain momentum and keeps the team on track to successfully complete the CQI activity.

1.2 Agree CQI roles and responsibilities

- It is important to define and delegate specific roles and responsibilities in the team. Potential roles or different team members are included as an Appendix.
- Consider in your team who has the skills and ability to complete each task. You could ask staff to gauge their confidence out of 10 to complete an allocated task- this can help identify learning needs.
- Ensure all team members have access to Primary Sense™ desktop or Cat Plus Top Bar to allow prompts for care action items
- Identify and meet the training and education requirements of team members to fulfil their CQI role and their role in your [COVID-19 vaccination program](#).
- Remember to share your CQI plan (template) with the whole practice team to ensure that everyone is aware of the activity and their roles and responsibilities.



Training resources for [Primary Sense](#) and [CAT Plus](#) are available online.

1.3 Set realistic timelines

- It is important to specify the specific steps and estimate how long each one will take to complete. It is also important to agree dates in advance, when progress will be reviewed.
- Allow some flexibility with the timelines and expect and plan for delays. Some of the factors to consider when you set your timelines include:
 - o Where you are in the cycle of accreditation
 - o Staff leave and capacity
 - o Seasonal priorities and anticipated workload, i.e. the winter period tends to be particularly busy
 - o The interval between the COVID-19 vaccine doses (12 weeks), and between the COVID-19 and influenza and other vaccines (2 or more weeks)



Internal factors you control:

Develop a calendar of known periods of specific activity to align with CQI focus to support proactive planning

External factors and factors outside your control:

Ensure disaster management plans and business continuity plans are up to date and all staff are aware of their roles and responsibilities

Step 2 - Use data to set goals and identify suitable patients

2.1 Current performance and future goals

- Ask the following questions to assess current and future performance using your practice data:
 - o What is the current capacity of staff in the practice to take on additional responsibilities?
 - o How many COVID-19 vaccinations are you able to provide per day or week?
 - o What percentage of your patient population do you estimate is in each of the COVID-19 priority groups? What proportion will be offered vaccination?

- o Is your target realistic?
- o How long will it take to achieve this goal?
- A CQI activity is simply a structured, focused and co-ordinated attempt to close the quality gap between your current, baseline performance and a desired outcome or level of performance in the future. COVID-19 vaccination is a new initiative, so the baseline is zero.
- Practice teams that set SMART goals are more likely to be successful. The acronym SMART describes some of the desired characteristics of a goal: specific, measurable, achievable, relevant and timed.
- Two examples are provided to illustrate the difference between SMART and non-SMART goals.

SMART goal example

Practice A decides to increase the proportion of influenza vaccination for their vulnerable patients from 40% (current performance) to 80% (goal) over a 12-week period. They calculate that they will need to vaccinate 50 patients to achieve their goal. They will achieve this goal by vaccinating 5 patients a week. This provides them with a small buffer of time. They also agree to review their progress every three weeks.

Non-SMART goal example

Practice B decides to increase the proportion of influenza vaccination for their vulnerable patients. They agree that their GPs and practice nurse will identify patients during their routine work and see how they go in a few weeks.

2.2 Data extraction and analysis tools (Cat Plus/Primary Sense™)

- The two data tools that are available in the Gold Coast are Cat Plus and Primary Sense™. GCPHN subsidises the licences for Gold Coast general practices to access CAT Plus and / or Primary Sense™ data tools at no cost to the practice.
- The quality of your practice data, and whether the data is used to inform improvement, are more important considerations than which tool you use.
- Using a data extraction and analysis tool helps you to use your practice data in a meaningful manner. The main applications of data tools in CQI activities are to:
 - o Establish your performance baseline. With COVID-19 vaccination, the baseline is zero. However, subsequent COVID-19 vaccine CQI activities will have a baseline.
 - o Identify specific groups of patients – also referred to as samples of patients – who may benefit from being included in a CQI. The best data tools have the capability to generate lists with the names and information of all the patients in your sample. With COVID-19, the [predefined priority groups](#) is a potentially useful starting point.
 - o Consider creating [Top Bar](#) prompts to identify patients who are potentially eligible for COVID-19 vaccination. This function can opportunistically be used by GPs during consultations to offer or discuss vaccination with these patients.



TIP - collecting, analysing and sharing aggregated practice data are [PIP QI requirements](#)

Select a sample of patients

- The data tools provide you with an overview of your practice performance and the characteristics of your practice population. It also enables you to select and focus on a specific group or sample of patients.
- It is important to direct your improvement efforts at those patients who are most likely to benefit from them. The next step is therefore to identify a suitable group (sample) of patients for COVID-19 vaccination. Potential patient groups could be:
 - patients in specific age groups
 - patients with significant co-morbidities
- Feasible samples are typically between 50 and 100 patients. This activity is an exception and will require much larger samples.
- Selecting a suitable sample and picking the right sample size can be challenging decisions for many practice teams. Contact your PHN Practice Support Team if you would like to discuss this further.
- GCPHN are developing [prefilled templates](#), practical examples and have [recipes](#) available that explain how to use data tools to select samples of patients for COVID-19 vaccination activities.

For Cat Plus users the following activities may be relevant

- [Immunisation CQI template examples](#)
- [Identify patients with one or more chronic conditions](#)
- [Asthma cross tabulation report](#)
- [COPD cross tabulation report](#)
- [CVD cross tabulation report](#)
- [Heart failure cross tabulation report](#)
- [Patients 70-74 with three chronic conditions](#)
- [Diabetes cross tabulation report](#)

For Primary Sense™ users the following resources may be relevant

- Primary Sense™ users can access CQI templates via the desktop application under the CQI tab. Instructions can be found [here](#)
- Videos on how to use Primary Sense™ and reports can be found [here](#)
- The Primary Sense COVID 19 vulnerable patients report will support identification of patients for the COVID 19 vaccination program

TIP - *sample and sample size* are the number of patients you select for a CQI activity.

Sampling is the process of selecting suitable patients.

Sampling strategy is how you choose patients; this is your decision



Step 3 - Implement improvement actions

3.1. Agree specific improvement actions

- It is important to set a SMART goal and identify a sample of patients. It is equally important to decide what improvement actions or interventions will be required to reach your goal. In other words, what is it that needs to be done for every patient in your sample?
- Decide whether your CQI activity requires a single intervention or multiple interventions.
- Consider creating [Top Bar](#) prompts to automatically flag patients in the sample. You may also wish to consider Primary Sense™ prompts to support opportunistic identification of eligible patients.
- Consider patient engagement/experience and activation (communication and feedback). A practical example of this is to add questions to your accreditation survey and offer survey participation to the patients in the CQI sample.



*TIP - A **care bundle** is a set or number of interventions that, when used together, synergistically improve patient outcomes.*

- The Central Queensland, Wide Bay Sunshine Coast PHN developed and the Queensland PHN COVID-19 Vaccine Lead Working Group developed and validated four Vaccination Preparation Packs. The packs include checklists and were specifically developed to support general practices to successfully implement and deliver a COVID-19 vaccine program.
 - Part 1: [Preparing your practice policies and protocols](#)
 - Part 2: [Internal preparation for your team](#)
 - Part 3: [Identify eligible patients and plan the patient vaccination journey](#)
 - Part 4: Clinical preparation and implementation - Currently in development

MBS items to support implementation

[MBS online - In-Depth Patient Assessment for a COVID-19 Vaccine](#)

3.2 Examples of COVID-19 vaccination improvement actions and practical tips

- Remember - patients can be added to the sample throughout the activity.
- The following list of potential improvement actions is not exhaustive or mandatory and provided as examples. Every practice team should select their own improvement actions and decide how many improvement actions to include.
 - o Create a 'stand-by' strategy and list of patients to mitigate vaccine wastage because of patients who do not attend appointments.
 - o Offer appointments in batches that match the number of vaccines per vaccine multi-dose vial
 - o Obtain consent prior to COVID-19 vaccine clinics, then confirm consent during face-to-face meeting.

Step 4 - Regularly review your CQI activity

- It is important to monitor your progress regularly.
- During the planning and preparation step you would have identified the timelines and activity review points which should now be implemented.

Practical considerations:

- Set the frequency of CQI progress reviews according to the timeline of your activity. For example, it would be reasonable to check the progress of a 12-week activity every fortnight.
- Use your practice data at each checkpoint (review) to determine your progress towards your goal. Remember to check that the data corresponds with the period being reviewed. Some data extraction tools have a lag between current and past performance.
- Identify the barriers or challenges (if any) to your progress during the reviews. Consider whether and what corrective actions to take.
- The following questions may be helpful to work through during your CQI activity reviews:
 - Successes- what has worked well so far?
 - What were the challenges and barriers?
 - Were you able to overcome the challenges and barriers?
If not, what do you need to do next?
 - If you were able to overcome challenges or barriers, what did you learn, and how can you use that in future?
- During the final review meeting, when you conclude your CQI activity, it is important to consider and document:
 - What worked well?
 - What could have worked better?
 - What were your learning points, learning needs and were learning needs met?
 - What changes did you make to your practice policies and procedures or systems because of this CQI activity (if any)?

Step 5 - Sustain and maintain improvements

- Once performance has been improved, it usually requires regular reviews to maintain the gains.
- It is therefore important to establish a reliable procedure to ensure your improved performance is sustained.
- New processes that are developed need to be documented and communicated to the wider team to ensure ongoing implementation is achieved.
- Agree the intervals at which you will review your performance relating to this activity, decide who will be responsible for the review, and the actions that will be taken if performance falls short of your new standard.
- Consider potential topics for a new CQI activity, and how your experience with this activity can help you to be more efficient and effective.
- Share your CQI activity, its successful outcomes and learning points with everyone in the practice team.



TIP - Speak with GCPHN if you would like support to showcase your work and share with your Gold Coast peers.

Step 6 - Document your CQI activity

- Ensure you document your CQI activity to meet the PIP QI guidelines. Documentation is also a requirement for CPD purposes.
- Documentation must be kept for 6 years for evidence of PIP QI.
- It is especially important to document your baseline and improved performance, and list improvement actions and learning points.
- If your CQI activity has resulted in changes to your policies and procedures, they can be included in the documentation as attachments and evidence for accreditation purposes.
- There is no single 'right way' to document a CQI activity. The types of documents and templates we provide in this Toolkit are intended as examples. Practice teams can modify them to suit their own needs.
- There are three main types of documents that are required for a CQI activity. The fourth type of document is desirable but not essential. All documents are 'living' in the sense that they can be updated throughout the CQI process. The four types are:

- 1 Documents about meetings. A CQI activity requires at least two team meetings – one at the beginning and one at its conclusion. It is strongly recommended to also record your review meetings or 'check points'.
- 2 Documents about data. This type of documents could include reports from Pen CS or Primary Sense with aggregated performance data. It can also include lists of patient names that were sampled. These documents are not routinely shared and should be managed according to data privacy and governance procedures.
- 3 Documents about the CQI activity. GCPHN developed a CQI activity template that enables practice teams to document any CQI activity from beginning through to its conclusion. The template is suitable for PIP QI and CPD purposes. The COVID-19 vaccination CQI activity template can be found [here](#)
- 4 Documents about practice policies and procedures. Practice policies and procedures- changes can be saved as evidence for PIP QI



Primary Sense™ users:

Templates can also be located in Primary Sense™ Desktop. The Guide for these can be found [here](#)

Additional support and information

PIP QI

- For your COVID 19 vaccination CQI activity to be suitable for PIP QI purposes, you must ensure that all the requirements have been met.
 - See details of the PIP QI requirements on [GCPHN webpage](#)
- GCPHN Primary Health Care Improvement team can provide virtual/face to face meetings or access to recorded webinars that will provide:
 - Resources or training on the use of data extraction tools to assist with identification of a patient sample.
 - Worked examples of CQI action plans to support implementation and meet PIP QI requirements.
 - Tips to support CQI implementation.

CPD

- If general practitioners would like to be eligible for CPD points for participating in the WCC CQI activity, further information can be found on [RACGP](#) and [ACRRM](#) webpages.



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COVID-19 resources

- The Queensland Health COVID-19 Information for Clinicians webpages provide useful and up-to-date information. [COVID-19 information for Queensland clinicians | Queensland Health](#)
- [GCPHN COVID-19 online resources](#) for health professionals
- The process for reporting AEFI are described on the [Queensland Health webpage](#)
- The [ATAGI immunisation provider guide to obtaining informed consent for COVID-19 vaccine](#) addresses frequently asked questions your patients may have regarding the vaccinations, along with suggested discussion points.
- The DoH has released a [consent form for COVID-19 vaccination](#). It is not mandatory to use this consent form, or to obtain written consent, but practices will need a way to ensure patients have the relevant information prior to receiving the vaccine, and to document informed consent.
- The DoH and Australian Technical Advisory Group on Immunisation (ATAGI) have a collection of [resources for clinicians](#), including advice and guidance on delivering COVID-19 vaccinations.
- The [vaccine eligibility checker](#), hosted by healthdirect, is now live
- The Australasian Society of Clinical Immunology and Allergy (ASCIA) has released a [set of FAQs](#) to answer questions regarding COVID-19 vaccination in relation to allergy, immunodeficiency and autoimmunity

Other GCPHN CQI Toolkits

GCPHN has developed a range of toolkits which are available on the [GCPHN website](#).

Appendix

Potential CQI roles and responsibilities of practice team members

General Practitioners

- Provide clinical oversight and governance of the activity

Practice Nurses

- Support the implementation of the activity , including:
 - o Consent process
 - o Vaccine administration if endorsed
 - o Accessing/checking AIR
 - o Consumable ordering and stock management to meet needs
 - o Monitor vaccine stock to ensure quantity meets the needs of the vaccination program
 - o Recalls, bookings, reminders added to clinical software for dose 2
- Provide support to generate data reports to identify priority patient groups
- Identify patients to provide opportunistic vaccinations

Practice Manager

- Maintain up to date patient registers
- Analyse practice data
- Identify and support implementation of training for the CQI and practice team
- Establish and oversee recall/reminder systems
- Monitor progress against CQI activity
- Review and update new systems to ensure sustainable change
- Document policy and procedures and support implementation across the team

Reception Staff

- Billing of appropriate item numbers
- Ensuring post vaccination observation time is completed
- Order and maintain supplies of resources (eg patient information)
- Add flags or clinician reminders for patients in the activity
- Support the practice team to identify patients eligible for relevant reminders and contact patients either via letter, text message, phone call etc

Medical and Nursing students (if relevant)

- Consider tasks that medical or nursing students could implement during clinical placements to support your CQI activities



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