## QI Action Plan – \*add practice name\*

## Vaccinations during pregnancy QI activity

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| **Ask-Do-Describe** |
| **Why do we want to change?** |
| * **Gap**
 | Low coverage of influenza and pertussis vaccinations in eligible pregnant women  |
| * **Benefits**
 | Reduce risk of influenza in pregnant women and pertussis in newborn babies |
| * **Evidence**
 | The influenza and whooping cough vaccines are provided free to pregnant women through the National Immunisation Program and is a safe and effective way to protect pregnant women and their babies against influenza and pertussis. Protective antibodies are passed through the placenta to the babies, protecting them in their first few months of life when they are most vulnerable.Influenza is a serious disease for pregnant women and the developing and newborn baby. Changes to immune, heart and lung functions during pregnancy make pregnant women more vulnerable to severe illness from influenza.[Whooping cough](https://www.health.gov.au/diseases/pertussis-whooping-cough) can cause serious complications including brain damage, pneumonia and sometimes death. The most effective way to protect young babies from whooping cough is to receive the whooping cough vaccine during pregnancy. Vaccination during pregnancy reduces whooping cough disease in babies aged less than three months by over 90%. |
| **What** do we want to change? |
| * **Topic**
 |  Increased proportion of pregnant women offered/administered Influenza and pertussis vaccines at \*practice name\*   |
| **How much do we want to change?** |
| * **Baseline**

*Baseline data is the % of your current performance.*Baseline data for QI activities can be obtained from multiple sources:* *Data analytic tools – Primary Sense™ via the Pregnancy and Vaccinations Report.*
* *Clinical information systems using the “search “function/patient registers.*
 | ***Examples:**** *\*XX\* % of pregnant women are eligible for Influenza and pertussis vaccines (based on Primary Sense report data)* ***OR***
* *Current baseline performance is \*XX\*% patients with a pertussis and influenza vaccine not recorded.*
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| * **Target**
* *Your target is the planned % result of the improvement.*
 | **Example***: Initial target is to reduce number of eligible patients with missing vaccines to \*XX\* who are pregnant women at appropriate gestation for recommended vaccination.* |
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| * **Sample**

*The number of pregnant patients that are eligible for a influenza and pertussis vaccine to meet your target.* | **Example** *\*XX\* % patients who have not received a pertussis and influenza vaccine.* ***Tip –*** *consider narrowing down your sample size by focusing on:** *Women who are in their 3rd trimester of pregnancy*

*Primary Sense™ Users Tip (consider narrowing down by):** *Existing appointment to allow discussion and rebooking of vaccine appointment*
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| **Who** are involved in the change? |
| **Contributors***Add names of the practice team involved* | **Practice Manager:** **GPs:** **Practice Nurses:** **Receptionists:** **GCPHN QI Project Officer:** |
| **When are we making the change?** |
| * **Deadlines**

*Add key dates here for this project.*  | **Baseline data report generated:****Implementation between (from/to):****Review meeting:** **Final meeting:** |
| **How are we going to change?** |
| * **Implement**
* *List some improvement strategies in order of implementation (see Appendix 1 for suggestions)*
 | 1. 2. 3.  |
| **STOP: The next section is to be completed after implementation has already commenced.** |
| * **Monitor**

*A minimum of one QI* *activity review/touchpoint* *is required. You can include multiple reviews/touchpoints – list by date.*  | **Review 1 - Date:**What is working/not working?  Has there been a change in your performance? If not, why not?   |
| **STOP: The next section is to be completed at the end/closure of activity.**  |
| **How much** did we change? |
| * **Performance**

*Question: Did you achieve your target?* *If not, reflect on why not* | **Example:** *Number of patients due for a pertussis and influenza vaccine has increased from baseline XX to XX* |
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| * **Worthwhile**

*Was the effort to complete the improvement activity worth the outcome?**Did the team value the improvement activity?* | **Examples:*** *We believe the effort to complete the activity was worthwhile as we increased the number of patients due for a pertussis and influenza vaccine* ***OR***
* *We believe this activity was not worth the effort required, as we did not significantly reduce the number of patients due for a pertussis and influenza vaccine.*
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| * **Learn**

*What lessons learnt could you use for other improvement activities?**What worked well, what could have been changed or improved?* | **Example:** *Sending SMS or letter reminders to parents resulted in higher bookings compared to phone calls.* |
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| **What next?** |
| * **Sustain**

*Implement new processes and systems into business as usual - which parts of this activity, if any, will you incorporate into business as usual at your practice?* | **Examples:** * *Nurses/Doctors will continue to add in reminders for pregnant patients due for a pertussis and influenza vaccine during appointments* ***OR***
* *Nurses/Doctors will schedule to have the pertussis and influenza vaccine during their next antenatal appointment when at the appropriate gestation for recommended vaccination.*
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| * **Monitor**
* *Review target measure quarterly and initiate corrective measures as required.*
 | ***Example –*** *Review Primary Sense Pregnancy and Vaccinations Report, once a month to track performance over time.* |
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| **Appendix 1 – Potential solutions** |
| ***Review suggested implementation strategies listed below. You do not have to implement all options that are brainstormed/listed.**** Identify eligible patients. For example, using Primary Sense™ - *Pregnant and Vaccinations* report
	+ Staff to add a reminder and follow up with patients - could be by letter, SMS, secure email or phone call.
	+ Identify and flag patients with existing appointments.
	+ Identify if staff member has capacity to complete on the day, if not flag to be offered at time of visit and rebook.
* Promote pregnancy vaccinations via webpage, newsletter, and posters, some resources include:
	+ [Department of Health and Aged Care](https://www.health.gov.au/topics/immunisation/when-to-get-vaccinated/immunisation-for-pregnancy)
	+ [QLD Health – vaccination matters](https://www.vaccinate.initiatives.qld.gov.au/who-should-get-vaccinated-and-when/during-pregnancy)
	+ [Maternal vaccinations factsheet](https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&ved=2ahUKEwjz55qbs72BAxVQCYgKHVu8CBkQFnoECEIQAQ&url=https%3A%2F%2Fwww.health.gov.au%2Fsites%2Fdefault%2Ffiles%2F2023-04%2Fmaternal_factsheet_f_er_a4.pdf&usg=AOvVaw2S5E21aysSfY09HRtZgvqS&opi=89978449)
	+ [Sharing Knowledge About Immunisation (SKAI) factsheets](https://skai.org.au/pregnancy-and-newborn/resources/factsheets)
	+ [Sharing Knowledge About Immunisation (SKAI) infographics](https://skai.org.au/pregnancy-and-newborn/resources/infographics)
* Flag eligible patients and book with PN or GP to discuss benefits and identify barriers to vaccination
* Receptionist to add a recall to the remaining patients without appointments
* Monitor progress using “Summary Report of Practice Improvements”
* Opportunistic appointment if patient attends the practice for another purpose eg child being vaccinated
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