**QI Action Plan- \*add practice name\***

**\*population group\* Immunisation QI Activity**

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| **Ask-Do-Describe** | |
| **Why do we want to change?** | |
| **Gap**  *What is the gap you are seeing at your practice?*  *Why are you focusing on this group?* |  |
| **Benefits**  *What are the benefits to immunising this population group?* |  |
| **Evidence**  *Best practice guidelines – Australian Immunisation Handbook, QLD immunisations website etc* |  |
| **What** do we want to change? | |
| **Topic** | Increased proportion of at-risk patients offered/administered \*type of immunisation\* at \*practice name\* |
| **How much** do we want to change? | |
| **Baseline**  *Baseline data is the % of*  *your current performance.*  Baseline data for vaccination QI activities can be obtained from multiple sources e.g.:   * *Data analytic tools – Primary Sense via the Winter Wellness Report.* * *External data sources e.g. – Australian Immunisation Register (AIR) via the*   [*AIR042A COVID-19 Vaccination Status Report*](https://www.ncirs.org.au/sites/default/files/2022-03/NCIRS%20Requesting%20and%20viewing%20the%20COVID-19%20Vaccination%20Status%20Report%20%28AIR042A%29_1%20March%202022_Final.pdf)   * *Clinical information systems using the “search” function to identify recalls/patient registers.* | **Example:**   * *\*XX%/ number\* patients \*can add population group focus\* are due for a* \*type of immunisation\* *based on* \*data tool used to obtain data\**.* |
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| **Target**  *Your target is the planned %*  *result of the improvement.* | **Example:**   * *Our practice aims to \*reduce/increase\* the number of patients \* population group focus\* missing or overdue for* \*type of immunisation\* *from \*insert baseline data\* to \*insert goal number\** |
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| **Who** is involved in the change? | |
| **Contributors**  *Add names of the practice team involved.* | **Practice Manager:**  **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 evaluation 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:**   * *Missing or overdue* \*type of immunisation\* *in patients \*population group focus\* changed from \*baseline data\* to \*XX\* in \*XX\* months* |
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| **Worthwhile**  *Was the effort to complete the improvement activity worth the outcome?*  *Did the team value the improvement activity?* | **Example:** *We believe the effort to complete the activity* ***was worthwhile*** *as we:*   * *reduced the number of patients \*population group focus\* missing or overdue for the* \*type of immunisation\**.* * *developed a system and process to ensure patients \*population group focus\* due for a* \*type of immunisation\* *are followed up in a timely way,* ***OR*** * *We believe this activity* ***was not worth*** *the effort required, as we did not significantly reduce missing/overdue vaccinations identified in the \*data analytic tool\*.* |
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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 patients 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?* | **Example:**   * *Reviewing the \*data analytic tool\** report *to identify eligible patients and sending reminder SMS/letters* ***AND/OR*** * *Scheduling appointment for immunisations during current clinical appointment.* |
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| **Monitor**  *Review target measure quarterly and initiate corrective measures as required.* | **Example:** *Conducting monthly downloads reviews of \*data analytic tool\** report *to identify patients who are due for* \*type of immunisation\**.* |
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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.***   * Develop a process to:   + Allocate a team member and set up a reminder to regularly review Primary Sense Reports - \*insert type of report\* and consider:     - Who will review the report and clinical records to confirm patient eligibility?     - Who will manage information and resources relating to \*type of immunisation\* and have them available for team members to easily access?     - Who will follow up with patients?     - How will you record your work? - e.g., spreadsheet, word doc?     - Who will record your work?   + Set up an immunisation report via Best Practice and regularly review the automatically generated reports to identify patients who are due for a \*type of immunisation\* - consider:     - Who will review the report and clinical records to confirm patient eligibility?     - Who will manage information and resources relating \*type of immunisation\* and have them available for team members to easily access?     - Who will follow up with patients?     - How will you record your work? - e.g., spreadsheet, word doc?     - Who will record your work?   + Add vaccination recalls and regularly review in your practice clinical information system.   + Staff could add a reminder to patient files and follow up with patients - could be by letter, SMS, secure email or phone call.   + Identify and flag at-risk patients with existing appointments.   + Identify patients who are due for a health assessment who might be eligible for \*type of immunisation\**.*   + Identify if staff member has capacity to complete on the day, if not flag to be offered at time of visit and rebook. * Review the GCPHN [Immunisation QI Toolkit](https://gcphn.org.au/wp-content/uploads/2022/11/GCPHN-Imm-QI-Toolkit.pdf) to assist with implementing a step by step QI Activity. * Promote \*type of immunisation\* via webpage, booking system, social media, newsletter, pamphlets and posters. Some resources include:   + [Department of Health and Aged Care](https://www.health.gov.au/topics/immunisation?language=und)   + [QLD Health – vaccination matters](https://www.vaccinate.initiatives.qld.gov.au/home)   + [The Australian Immunisation Handbook](https://immunisationhandbook.health.gov.au/)   + [SKAI](https://skai.org.au/childhood) * Opportunistic appointment if patient attends the practice for another purpose eg clinical appointment or influenza vaccination appointment. * Consider reviewing your process for obtaining and maintaining patient information, are there any changes you would like to implement in the practice to identify regular patients of your practice? * Consider reviewing how Primary Sense is accessed and used by your practice team and if training is required to support effective use of Primary Sense reports, prompts and alerts. Information including making the most of Primary Sense recorded videos can be accessed [here](https://gcphn.org.au/practice-support/primary-sense/primary-sense/) * Consider reviewing your practice health record policy and processes to ensure patient records are kept accurate and up to date. This not only supports the delivery of safe, effective and appropriate health care but provides essential information utilised by Primary Sense to inform reports, prompts and alerts available to your general practice team to support healthcare delivery, quality improvement initiatives and clinical audits. More information about standards can be found from [RACGP Improving health record quality in general practice](https://www.racgp.org.au/FSDEDEV/media/documents/Running%20a%20practice/Practice%20resources/Improving-health-record-quality-in-general-practice.pdf) and [Australian commission on safety and quality in health care.](https://www.safetyandquality.gov.au/standards/nsqhs-standards/clinical-governance-standard/patient-safety-and-quality-systems/action-116) |