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

**Influenza/COVID-19 Immunisation QI Nurse Winter Activity**

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| **Ask-Do-Describe**  |
| **Why do we want to change?**  |
| **Gap** | As the winter season approaches so does the surge in respiratory diseases such as influenza, Respiratory Syncytial Virus (RSV) or COVID-19, increasing the risk of severe illness in vulnerable populations especially young babies, pregnant women, older people and individuals with complex health conditions. Some of these respiratory diseases are vaccine preventable, with vaccinations offered annually for influenza and at set intervals for COVID-19.  |
| **Benefits** | * In 2024, both the COVID-19 and influenza vaccinations will be free for all QLD residents.
* Annual vaccination of the influenza vaccine and a booster of the COVID-19 vaccine is an important measure to prevent the complications associated with both diseases ([Queensland Health](https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/immunisation/service-providers/influenza)).
* Both vaccines reduce the severity of the disease and complications including death associated with influenza and SARS-CoV-2 infections in at risk populations.
* Influenza vaccines reduce the high hospitalisation rates for at risk populations, especially young children and babies during the winter season.
* The influenza and COVID-19 vaccine can be co-administered, with studies showing the that co-administration of the influenza and COVID-19 vaccines is safe and produces a good immune response against both viruses ([AusVaxSafety](https://ausvaxsafety.org.au/influenza-back-australia-2023-why-flu-shot-so-important-who-eligible-and-what-expect-days-following))
* It is important to remember that the COVID-19 vaccine doses provide good protection against severe illness and death for several months. However, protection wanes over time and booster doses should be encourage to maintain protection ([DoHAC, 2023](https://www.health.gov.au/our-work/covid-19-vaccines/advice-for-providers/clinical-guidance/clinical-recommendations%22%20%5Ct%20%22_blank); [Queensland Health](https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/immunisation/service-providers/influenza)).
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| **Evidence** | To mitigate the burden on the healthcare system and decrease the spread of influenza and COVID-19 during the winter season, annual vaccination for influenza and a COVID-19 booster is highly recommended ([DoHAC](https://www.health.gov.au/topics/immunisation/vaccines/influenza-flu-vaccine)). For individuals and communities, this will: * Maintain protection, particularly for priority and at-risk populations.
* Reduce the prevalence of symptoms associated with ‘long COVID’.
* Protecting people who cannot be vaccinated due to medical conditions.
* Slowing the spread of the influenza and COVID-19 virus.
* Keep hospitalisation rates at a level so our health system can cope.

The more people vaccinated in communities, the less likely the disease will spread [(Queensland Health)](https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/immunisation/service-providers/influenza).   |
| **What** do we want to change?  |
| **Topic** | Increase COVID-19 and/or influenza vaccination rates for regular patients aged \*insert age group\* 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.:* * *Primary Sense via the* [*Winter Wellness Report*](https://www.youtube.com/watch?v=A5tiYUEoYsc&list=PLQ-PNjL_LGngPKc1o2Ru8VCQjPUP82-PU&index=16)*.*
 | **Example:** *\*XX number (%) \* of patients aged \*insert age range\* have an up to date COVID-19 booster and/or influenza vaccine for the \*year\* winter season based on the Primary Sense Winter Wellness Report.*  |
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| **Sample***Sample is the number of patients that will be involved in the QI activity who require a COVID-19 booster and/or influenza vaccine.*  | **Example:***This activity will involve \*XX\* patients aged \*insert age range\** |
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| **Target** *Your target is the planned % result of the improvement.*  | **Example:** *Our practice aims to increase the number of patients who require an influenza and/or COVID-19 vaccine to \*XX (%) \*.*  |
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| **Who** is 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 activity.*  | **Baseline data report generated:****Implementation between (from/to):****Review meeting/s:** **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?**What is 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***Did you achieve your target?* *If not, reflect on why not* | **Example:** *XX (%) patients aged \*insert age range\* have been immunised against influenza and/or COVID-19 which is an increase from \*insert baseline data (%) \* to XX (%)* |
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| **Worthwhile***We believe the effort to complete the activity* ***was worthwhile*** *due to…****OR****We believe this activity* ***was not worth*** *the effort required due to…* | **Reflect on the following questions:** * *Did the activity provide the outcome expected?*
* *Did this process provide patients with the required information and services?*
* *Did the team value the improvement activity?*
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| **Learn***Please list all your learning and experiences from the QI activity.*  | **Reflect on the following questions:** * *What have you* ***learnt*** *from the QI activity?*
* *What* ***worked well*** *during the QI activity?*
* *What* ***challenges*** *did you faced during the QI activity?*
* *What would you* ***change*** *for the next QI activity?*
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| **What next?**  |
| **Sustain***Implement new processes and systems developed from the QI activity into business as usual.* | **Reflect on the following question:***Which parts of this activity, if any, will you incorporate into business as usual at your practice?* |
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| **Monitor***How will you continue to review target measures and initiate corrective measures?* | **Example:** *We will review the Primary Sense – Winter Wellness report once a month to track given influenza vaccinations at our practice. This will change to once a quarter after the flu season has finished.*  |
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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.**** Find a list of patients without up to date COVID-19 booster or current influenza vaccinations recorded (or are due for these immunisations) using the Primary Sense [Winter Wellness Report](https://www.youtube.com/watch?v=A5tiYUEoYsc&list=PLQ-PNjL_LGngPKc1o2Ru8VCQjPUP82-PU&index=16)
	+ Other [Primary Sense](https://www.youtube.com/watch?v=yRR2x8f9k28&list=PLQ-PNjL_LGngPKc1o2Ru8VCQjPUP82-PU&index=13) identifiable reports for influenza include:
		- *Pregnancy and Vaccinations*
		- *Chronic Lung Diseases and Asthma*
		- *Patients missing PIP QI or accreditation Measures*
		- *Patients booked in with missing PIP QI measure*
	+ AIR has a [*AIR042A COVID-19 Vaccination Report*](https://www.servicesaustralia.gov.au/how-to-view-identified-reports-using-air-site-through-hpos?context=23401)provides the relevant COVID-19 vaccination history for individuals who received a MBS service at a provider’s practice, or individuals who were previously vaccinated by the provider. You can share this report with everyone in the practice who needs to view it.
		- **Tip –** The [*AIR042A COVID-19 Vaccination Report*](https://hpe.servicesaustralia.gov.au/AIR_reports.html)can be set up to automatically generate weekly, fortnightly or monthly.
* Check the patient’s immunisation history prior to vaccinating from:
	+ The patient’s clinical record (practices using Best Practice and Medical Director can integrate their clinical software with AIR).
	+ [AIR](https://www.servicesaustralia.gov.au/how-to-set-up-your-access-to-air?context=23401) via PRODA.
* Ask all eligible patients at every appointment over the Autum/Winter season if they have received their influenza or COVID-19 booster.
	+ Record COVID-19 and/or influenza vaccines given elsewhere to ensure practice data is current during the winter season.
* Add a reminder and/or vaccination recalls in patients’ records and flag eligible patients to maximise opportunistic immunisation appointments.
* Decide how staff will invite patients in to offer a COVID-19 booster and/or influenza vaccine. For example:
	+ SMS (via the [Primary Sense SMS list functionality](https://aus01.safelinks.protection.outlook.com/?url=https%3A%2F%2Fgcphn.us9.list-manage.com%2Ftrack%2Fclick%3Fu%3D5fae49507463d100364eaaa4d%26id%3D99298298bb%26e%3D87fa6548bb&data=05%7C01%7CMichelleE%40gcphn.com.au%7C3df89c73c0e5416db31e08dbb9816a7e%7Ceb5a1a3e16dd4e49b6aa8a085762f553%7C0%7C0%7C638307737719414326%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=vmPeMSlWLm6xXKyebwp2irpIw0Sf%2Fh%2BiOhsEqV%2BkDKk%3D&reserved=0)), phone, letter, secure email and,
	+ opportunistically in booked appointments e.g., health assessment, care plan and review appointments.
* Identify and flag at-risk patients with existing appointments and ask the practice nurse or GP to discuss the benefits and identify barriers to vaccination with the patient during their appointment.
	+ Identify if staff members have capacity to complete on the day, if not flag to be offered at time of visit and rebook.
	+ At risk patients can be identified via the Primary Sense [*patients booked in with missing PIP QI measures*](https://www.youtube.com/watch?v=Sm2TsLDqiZA&list=PLQ-PNjL_LGngPKc1o2Ru8VCQjPUP82-PU&index=9)report*.*
* Ensure new patients immunisation history is recorded in the practice’s clinical software via the AIR integration option in [Best Practice](https://kb.bpsoftware.net/bppremier/saffron/Clinical/Immunisations/ViewAIR.htm?Highlight=immunisation) and Medical Director.
* Practice staff to stay informed with current immunisation advice and resources via:
	+ [Australian Immunisation Handbook](https://immunisationhandbook.health.gov.au/)
	+ [Department of Health and Aged Care – COVID-19](https://www.health.gov.au/our-work/covid-19-vaccines)
	+ [Department of Health and Aged Care – Influenza](https://www.health.gov.au/diseases/influenza-flu)
	+ [QLD Health – COVID-19- in Queensland](https://www.qld.gov.au/health/conditions/health-alerts/coronavirus-covid-19)
	+ [QLD Health – vaccination matters](https://www.vaccinate.initiatives.qld.gov.au/home)
	+ [NCIRS COVID-19 Resources](https://ncirs.org.au/covid-19/covid-19-vaccination-program-australia)
	+ [2024 Free Influenza Vaccination Program QLD Health](https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/immunisation/service-providers/2024-free-flu-vaccination-program)
	+ [Influenza Resources](https://www.health.qld.gov.au/clinical-practice/guidelines-procedures/diseases-infection/diseases/influenza)
	+ [SKAI](https://skai.org.au/)
	+ [Health Pathways – Influenza Immunisation](https://goldcoast.communityhealthpathways.org/52701.htm)
* Implement ways to promote COVID-19 boosters and the free influenza vaccine for your patients and consider how your practice may engage with hesitant and overdue patients using the Winter Vaccination QI Toolkit. Promotion could be through:
	+ Practice webpage and/ or social media pages.
	+ SMS alerts/ online booking system messaging.
* Offer designated immunisation clinics for patients, consider your practice demographic and plan clinics accordingly (e.g., before/after school/ lunchtime/after work/weekends/designated clinics for vulnerable patients).
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