



COVID-19 Vaccine Rollout: Quality Improvement

About

Sydney North Health Network (SNHN) is offering practices in the region support by providing an incentive to complete Plan, Do, Study, Act (PDSA) cycles on practice preparedness for the COVID-19 vaccine rollout. SNHN will incentivise practices \$200.00 for each PDSA completed and up to five in total until May 2021. This is a total of \$1000 to assist in building and maintaining practice capability and capacity towards your preparation and readiness. This document is a guide to provide some ideas on preparedness for practices who are administering the vaccine or who may not be participating but to assist with population health planning for your practice. There are steps you can take to reassure your patients the vaccine is safe regardless of where they will have the vaccine.

Note: These ideas are a guide only and you should choose ideas that best suit your practice and staff.

The Model for Improvement – COVID-19 Vaccination Specific Activities

What are we trying to accomplish?

By answering this question, you will develop your goal for improvement.

- Commence planning for COVID-19 vaccination of patients and determining eligibility lists for recall of patients when the vaccine becomes available, this is important for practices in planning for their eligible population cohorts.
- The practice has a clearly defined approach for communicating with their patients around the COVID-19 vaccine, directing patients to the appropriate vaccine administration sites when required if your practice is not administering the vaccine, and ensuring ongoing support and continuity of care throughout the process. This is particularly important in the first phases for the elderly, patients with complex and chronic conditions and the vulnerable.
- Recall or remind patients to receive the vaccine - lists will be determined by the criteria for each phase of the rollout of the COVID-19 vaccine. A staged process will be developed to ensure all vaccine rollout phases are covered.
- If your practice is administering the vaccine you will need to ensure appointment availability to meet demand and a clear strategy for recall of patients to ensure the practice is not overwhelmed and supply and staff rostering meets this demand.
- Ensuring the practice has policies and protocols in place for the correct storage, administration and reporting for the vaccine.
- Education of staff at the practice to meet the guidelines of COVID-19 Vaccine administration including vaccine specific training, reporting requirements, contraindications and managing adverse reactions, and other training as determined by the practice.

How will we know that a change is an improvement?

By answering this question, you will develop measures to track the achievement of your goal.

Patients will see the benefit in having the vaccine and a high percentage of patients recalled will agree to receive the vaccine.

Patients are reassured and supported.



Supply meets demand with both staffing, appointment availability and stock.
Staff administering vaccines will have completed DOH COVID-19 training and jurisdictional requirements and be recorded in staff Human Resources documentation.
Smooth workflow of the vaccination process from booking to vaccination including recall processes for patients and subsequent doses.

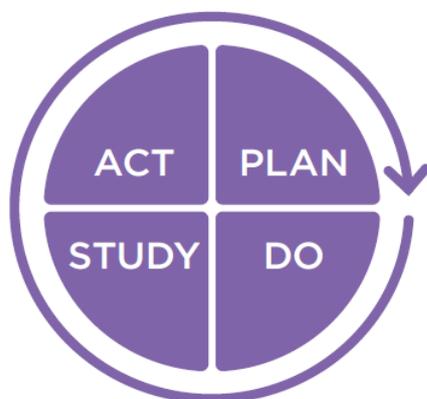
What changes can we make that can lead to an improvement?

By answering this question, you will develop the ideas you would like to test towards achieving your goal.

List your ideas for change – this list is not exhaustive, please use ideas relevant to your practice and QI needs

IDEA 1	Clear role descriptions - who is responsible for which task, admin, practice nurse and GP to create a streamlined workflow.
IDEA 2	Clear policy and procedure protocol that align with all relevant state and national guidelines for each COVID vaccine supplied.
IDEA 3	Defined criteria for searching of all patient cohorts for vaccine administration and/or directing patients to the most appropriate vaccine administration clinic/ centre.
IDEA 4	Taking a population health approach to ensure patients are confident to receive the vaccine either at your practice or in another setting.
IDEA 5	Ensure all immunisers have completed relevant training to provide the vaccine and these staff have either a PRODA account or the required delegations.

PLAN – DO – STUDY - ACT



Please complete a new Worksheet for each change idea you have documented on the previous page



Some ideas to test (NB: ideas have been provided for practices who will vaccinate patients, as well as practices who may initially only support patients to access the vaccine)

IDEA 1	<i>Describe the idea you are testing</i> Identify patients according to the criteria, eligible for the various phases of the COVID-19 vaccination rollout (DoH Roadmap), this will be a staged approach commencing with patients 80+ using CAT4. Patients list created for either vaccination at the practice or patient identification to ensure patients are directed and feel confident to attend an alternate clinic or setting.
PLAN	<i>Might include what, who, when, where, predictions & data to be collected.</i> Identify priority populations for the first phase of phase 1b – patients 80+.
DO	<i>Was the plan executed? Document any unexpected events or problems.</i> Use the CAT4 to create lists of patients for each GP for their patients 80 years and over.
STUDY	<i>Record, analyse and reflect on the results.</i> Searches were completed and information sent to initiate early discussions with patients for vaccination.
ACT	<i>What will you take forward from this cycle (next step or next PDSA cycle)</i> Patients have contacted the practice and GP's to discuss vaccination requirements.

IDEA 2	<i>Describe the idea you are testing</i> Ensure all staff are aware of roles and responsibilities including clinical and administration staff.
PLAN	<i>Might include what, who, when, where, predictions & data to be collected.</i> Develop a roles and responsibility protocol for all staff prior to vaccine rollout and ensure all staff are aware of each staff members role as the administration of the vaccine commences.
DO	<i>Was the plan executed? Document any unexpected events or problems.</i> Hold an all of staff meeting to determine responsibilities for each staff member.
STUDY	<i>Record, analyse and reflect on the results.</i> Staff aware of what their own role was and that of the other team members, roles were clearly defined.
ACT	<i>What will you take forward from this cycle (next step or next PDSA cycle)</i> Ensure role responsibilities are outlined in Job Descriptions for future reference.



IDEA 3	<i>Describe the idea you are testing</i> Taking a population health approach to ensure patients are confident to receive the vaccine either at your practice or in another setting. Ensuring all staff a confident in having discussions with patients and directing to the most appropriate vaccination setting or clinic.
PLAN	<i>Might include what, who, when, where, predictions & data to be collected.</i> Practice nurse and practice manager will use the data extraction to tool to create lists of patients in age groups according to the Roadmap and priority populations.
DO	<i>Was the plan executed? Document any unexpected events or problems.</i> Assess numbers of patients on lists, assess practice capacity to set up dedicated half day clinics for administering the vaccine, prepare waiting area with social distancing requirements and ensure appointment times meet the capacity of the practice.
STUDY	<i>Record, analyse and reflect on the results.</i> Using the first vaccination clinic day as a test, booking less patients to then assess the flow and capacity, adjust as required or necessary to suit patient, provider and practice.
ACT	<i>What will you take forward from this cycle (next step or next PDSA cycle)</i> Continue to monitor capacity and demand and make changes as required.

Please use these ideas as a guide. Choosing patient age will be dependent on your population groups, size of practice etc. Please use criteria that best suits your practice and the workflow and how you can manage social distancing requirements. There are many other ideas to help in pre-planning and preparation, which could include:

- Education needs met for relevant staff
- A process in place to record vaccination details for patients receiving the vaccine in another setting
- Managing vaccine fridge capacity to meet the requirements of all vaccines held at the practice
- Infection control procedures maintained
- A system is in place for tracking of second doses of the vaccine for patients
- Relevant staff are able to upload patient vaccine information to AIR
- PRODA accounts are set up for providers and delegations have been allocated to relevant staff

Please use the PDSA resource to record your QI activities, one per activity, and return to your support coordinator who will contact you regarding invoicing and payment for each PDSA completed (up to five).

For more information please contact: pcait@snhn.org.au