Emergency and Disaster Management







Contents

1. Aim of this toolkit	3
2. The Quality Improvement Methodology (QIM)	4
3. Where to go for more support	7
4. HealthPathways	7
5. How to use this toolkit	7
6. Disaster Management	8
6.1. Activity: Prepare	8
6.2. Activity: Respond	12
6.3. Activity: Recover	15
Improvement plan examples	17
Improvement plan template	19

COORDINARE acknowledges that this resource has been adapted from the Disaster Prepare Toolkit developed by Brisbane South PHN and Disaster Management resources developed by Nepean Blue Mountains PHN.

1. Aim of this toolkit

To review your practice systems in the context of disaster management to ensure practices are prepared, can respond, and recover from emergency disasters.

Emergency disasters are unpredictable, destructive and can strike at any time. General practice is a critical service in Australia and in an emergency demand for services will rise. Ensuring general practice is prepared, can respond, and will recover from unexpected disasters will reduce the overall impact on the community.

This toolkit aims to help practices identify and implement processes to prepare, respond and recover from an emergency or a disaster. This toolkit is part of a suite of toolkits and is not intended to replicate work already done, but to use the outcomes of that work to enable practices to be prepared and proactive in the management of emergencies and disasters.





Who are the key people responsible for disaster preparedness in the practice?



Who are the key people responsible to communicate important messages to practice staff and patients?



Who has responsibility to ensure staff health and wellbeing is maintained?

2. The Quality Improvement Methodology (QIM)

As part of the Sentinel Practices Data Sourcing (SPDS) Project COORDINARE has developed a structured but simple population health approach to continuous quality improvement. The quality improvement methodology and SPDS program outcomes, as well as perceived impact, have been detailed in a peer-reviewed publication in one of the most respected Australian journals within the general practice and primary care context. You can review the publication here¹.

The methodology uses SMART goal setting as the overarching framework to ensure goals are specific (S), measurable (M), achievable (A), realistic (R) and time based (T), and consists of four fundamental components that are essential for guiding improvement.



This QI toolkit is designed to support your practice to make easy, measurable and sustainable improvements to provide best practice care for your patients. The toolkit will help your practice complete QI activities using COORDINARE's continuous Quality Improvement Methodology (QIM).

Throughout the toolkit you will be guided to explore your data to understand more about your patient population and the pathways of care being provided in your practice. Reflections from the module activities and the related data will inform improvement ideas for you to action using the QIM.

1. Abhijeet Ghosh, Elizabeth Halcomb, Sandra McCarthy and Christine Ashley (2020) Structured yet simple approaches to primary care data quality improvements can indeed strike gold. Australian Journal of Primary Health 27(2) 143-151.



Step 1: Define and analyse

- Undertake baseline data cleansing and initial clinical auditing. This will help ensure your practice has high quality data and help you to identify what needs improving.
- Take the time to **understand** what your **current processes** are, **what** the problem is and **why** there is a problem. By doing this you can **define** your improvement goal(s).
- Set realistic objectives which are specific, measurable, realistic and have a defined time-frame (SMART). Use plain language and avoid jargon so that the meaning is clear to everyone.



Step 2: Plan and implement

- Achieving improvements requires the collaborative effort of the entire practice team and all members of the team should feel empowered to contribute.
- It is important to obtain all of practice support and in doing so, to develop a shared vision for quality improvement and the patient outcomes the practice is looking to achieve.
- Make sure you identify a staff member who is dedicated to leading the work. They will be the Practice Champion.
- As a team you need to agree on what you will measure. This should be guided by the needs of your practice population or by your business priorities. These could be based on practice data e.g. Clinical Audit Tools and clinical database audits, near misses and patient and/or staff feedback.
- If you need help identifying the needs of your practice population, you can contact your Health Coordination Consultant to assist you in looking at your practice data.



Step 3: Document and communicate

- Map out and write down your idea for improvement.
- It is good practice to ensure internal processes are aligned with the steps and stages of the Improvement Plan. This will ensure everyone in your practice has a consistent approach to quality improvement and help your practice embed quality improvement as business as usual.
- Any issues, concerns or 'red flags' should be communicated across the entire practice team in team meetings or team huddles.
- Remember to celebrate your wins! Sharing results and progress help keep the team focussed. A great way to do this is to display Data Quality Snapshot Reports for all practice staff to see. If you need a hand with this you can contact your Health Coordination Consultant

✓ Helpful tips

Using COORDINARE's Improvement Plan ensure you document:

- What issues you found in the planning stage when you reviewed the practice data?
- Which of the issues will your practice work on?
- What is your baseline measure?
- What is the SMART goal to achieve the improvement?
- When will it start and end?
- Who is the practice champion?
- How will you keep the practice team updated?



Step 4: Monitor and evaluate

- Monitor progress as you go, acknowledge staff contributions and celebrate success, even the small ones.
- Ensure you undertake Improvement Auditing by comparing your baselines measures with more recent data auditing. This can be done monthly and filled out in the Monitoring and Revision section of the Improvement Plan.
- Participating in Benchmarking activities with your Health Coordination Consultant on a quarterly basis is another great way to monitor and review your progress.
- It is useful to reflect on what happened at the completing of the goal period. You should consider:
 - Did the activity result in an improvement?
 - If not, why?
- Did any other changes happen that you hadn't planned?
- By looking at the results you can decide whether your practice should Adapt, Adopt or Abandon the idea.

COORDINARE provides 'The Improvement Plan' template:





Some of the activities in this toolkit relate to the Practice Incentive Program Quality Improvement (PIP QI) measures. Keep an eye out for this icon throughout the toolkit.

3. Where to go for more support

Your Health Coordination Consultant (HCC) can provide support to undertake the activities in this toolkit. You can contact your HCC directly or via these details.





4. HealthPathways

<u>HealthPathways</u> is a free web-based portal designed to support health professionals in planning patient care through primary and secondary health care systems within the local region. It will help you manage and refer your patient to the right care, in the right place, at the right time.

HealthPathways content is developed collaboratively by general practitioners, hospital clinicians, and a wide range of other health professionals. They are designed to be efficient, simple and quick for GPs to use. HealthPathways are tailored to best meet the needs of the local communities and aim to help GPs support their patients by outlining:

- the best management and treatment options for common medical conditions
- Information on how to refer to the most appropriate local services and Specialists
- educational resources and information for patients to enable better self-management of health.

There are Pathways for general practice disaster planning and management

Within South Eastern NSW there are two different HealthPathways initiatives supporting each Local Health District. To access them use the links below.

ACT and Southern NSW	<u>Illawarra Shoalhaven</u>
Username: together	Username: connected
Password: forhealth	Password: 2pathways

5. How to use this toolkit

There are checklists included in this toolkit that will guide you and your practice.

- Use this toolkit to guide you along the journey.
- Set yourselves timelines to achieve your goals.
- Consider potential internal or external factors that could impact the activity and factor these into your planning e.g., accreditation preparation, staff leave (planned or unplanned), global pandemic, influenza vaccination season.
- Review your progress regularly.
- If you find your process is not working and you are not seeing improvements, then review your process and start again.
- Please note: This toolkit is intended to be used in 3 stages firstly in preparation for a disaster, secondly to review your response and third, to support recovery. It is important that the practice has a team approach to establishing priorities to ensure vulnerable populations receive the care they need.



6. Disaster Management

6.1. Activity: Prepare

Engaging in simple emergency planning activities will ensure your practice's preparedness and confidence when responding to an emergency. Overall, practices that have an up-to-date emergency response plan will be better positioned to respond to an emergency²

It is suggested that you meet as a practice team to discuss how you will prepare for an emergency disaster

Activity Things to consider Create a plan using the resources below Do you have a business continuity plan? Include plans for: Yes, confirm all the items Temporary practice location under 'Things to consider' are in place and then move to the next Staffing reductions Vaccine storage (cold chain policy and procedure) Insurance and financial documents stored offsite No, refer to the 'Things to IT back up e.g. (telehealth, electronic prescribing, technology and phone consider' in the next column management) Ensure a person in the practice has responsibility for updating and reviewing your plan Who is this and what is their role? Further information and resources: ▶ Emergency Business Continuity Plan NSW State Emergency Service (sesemergencyplan.com.au) <u>Business Continuity Plan: Example & How to Write | SafetyCulture</u> Computer-and-information-security.pdf (racgp.org.au) Do you have an emergency Appoint an emergency management coordinator or committee. response plan? Complete Yes, confirm all the items under 'Things to consider' are in Allocate the coordinator or committee to create an emergency response plan using the place and then move to the next resources below. Include: Emergency risk assessment No, refer to the 'Things to Loss of power plan consider' in the next column Evacuation and relocation plan Ensure the coordinator or committee has responsibility for updating and reviewing your plan Agree on a timeframe: Do you have an emergency kit stocked? Yes - Last stocktake No – Agree on a timeline and allocate task to coordinator or committee

	A antiquity of	This was to consider				
	Activity	Things to consider				
2.		Further information and guidance:				
		Access the RACGP emergency planning tool here: https://erpt.racgp.org.au/				
		COORDINARE's General Practice Emergency Response Plan				
		Risk assessment support, section C3.1 <u>Standards-for-general-practices-5th-edition_1.pdf.</u>				
		aspx (racgp.org.au)				
		National Disaster Risk Reduction Framework				
		Emergency kit - See page 6, section 1.4 of: <u>Managing-emergencies-in-general-practice.pdf</u> (<u>racgp.org.au</u>)				
		See HealthPathways				
		Illawarra-Shoalhaven HealthPathways - Disaster Planning and Management				
		ACT-Southern NSW HealthPathways - Disaster Planning and Management				
3.	Do you have a communications plan?	 Have you created phone, email, and website templates to be communicated in an emergency? 				
	Yes, confirm all the items under 'Things to consider' are in	Yes – Location				
	place and then move to the next step	No – Allocate task to coordinator or committee. Completion date:				
	No, refer to the 'Things to consider' in the next column	2. Set up instant messaging for staff:				
		Complete Date:				
		3. Ensure the emergency coordinator is aware of where to find up-to-date emergency				
		information e.g., FRNSW, SES, BOM, and local council.				
		Practice points and further information:				
		Instant messaging will allow quick and easy contact with staff in the event of a disaster				
		 Creating templates will ensure your practices can quickly and easily notify patients and the community 				
		Listen to your <u>local ABC radio station</u> for the latest information				
		Emergency Alert information for NSW				
4.	Are you prepared for new patients?	Do you have a response plan for emergency patients arriving at your practice with no history or identification?				
	Yes, confirm all the items under 'Things to consider' are in place and then move to the next step	Yes – Location				
		No – Allocate task to coordinator or committee. Completion date:				
	No, refer to the 'Things to consider' in the next column	Will your practice be accepting walk-in patients during an emergency?				
		Yes – ensure this is communicated via email and on your website.				
		No – as above				
		4. Do you have a process in place for triaging patients in an emergency?				
		Yes – Location				
		No – Allocate task to coordinator or committee. Completion date:				

Α	Activity	Things to consider	
6.		4. Ensure fire and evacuation drills are complete	d every 6 months.
		Complete Last drill date:	
		5. Are staff psychologically prepared for a disaste Yes –	er?
		No – refer to the APS information sheet <u>20aps-is-preparing-for-natural-disasters.pdf</u> (psychology.org.au)	
		Further information and guidance:	
		MIMMS Training MIMMS Disaster medical management courses, training and education	
		NSW Government <u>Emergency Response Manac</u>	
		First5 Minutes <u>Emergency Preparedness trainin</u>	<u>g</u> .
After reviewing your practice's procedures for emergency response preparedness ensure you test your	Plan:	Date:	
	eviewing your practice's	Plan:	Date:
	lures for emergency response	Plan:	Date:
plans!		Plan:	Date:
		Highlight some of the key learnings from your disa	aster planning:
		Outline actions to be taken:	
		Use COORDINARE's Quality Improvement Methodolo	ogy (QIM) to develop your Improvement Plan

6.2. Activity: Response

When a disaster strikes it's important to be prepared and have strong plans and processes in place to ensure your practice can respond appropriately and safely. After a disaster review your practice's response and consider what could have been done better and what processes or plans need to be implemented.

The aim of this activity is to review your practice's response to a disaster. Use the improvement template at the end of this document to further reflect on what worked and what didn't work.

	Activity	Things to consider
1.	Type of disaster	Resources and support for different types of disasters:
		Bushfires fact sheet
		Flooding fact sheet
		Extreme weather fact sheet
		 Mental health in emergencies and disasters fact sheet Thunderstorm asthma fact sheet
2.	Review how your practice enacted policies and	1. Did you have an emergency coordinator or committee?
	procedures throughout the	Yes
	disaster:	No – Who was responsible for your disaster response?
	TIP: Use the improvement plan	140 – Willo was responsible for your disaster response:
	template on page 20 to delve deeper into how your practice	
	can better respond	Was the emergency coordinator or committee's role well defined?
		Yes
		res
		No – Outline what changes you would make?
		3. Were emergency procedures followed by all staff? E.g., evacuations, safety measures and check ins.
		Check ins.
		Yes
		No – Outline how this could be improved in the next emergency:
		4. Which policies and procedures were the most useful when responding?
		5. Which policies and procedures need to be reviewed or updated?
		Allocate review and update to coordinator or committee.
		Completion date:

	Activity	Things to consider
	Activity	Things to consider
2.		Policies and procedures that may have been enacted:
		Business continuity plan
		Emergency response plan
		Cold chain policy and procedure
		Communications plan IT backup plan including your telehealth process
3.	Review how your practice	
3.	managed logistics during the disaster:	Was your practice safe to operate or did you relocate? Safe
		Relocate – Did any staff work remotely from home instead of the new location?
		Yes –
		No –
		2. Did you have a reduction in staffing?
		Yes – Could any changes be made to avoid this in future?
		No –
		3. Was your internet connection disabled?
		Yes – how did you run telehealth appointments?
		No –
		4. Did you lose power? Did you use a generator?
		Yes – Ensure you replace fuel and make note of any lessons learned
		res – Ensure you replace fuel and make note of any lessons learned
		No –
		5. Were there unexpected challenges that arose?
		Yes – what were your solutions?
		No – What worked well?

6.3. Activity: Recover

The aim of this activity is to support your practice when recovering from an emergency or disaster.

 Review the impact of the practice building after the disaster: No – What areas were damaged? Do you need to make a claim on your insurance policies? Yes – Responsibility 	
No – What areas were damaged? 2. Do you need to make a claim on your insurance policies?	
2. Do you need to make a claim on your insurance policies?	
Yes – Responsibility	
No –	
Further information and guidance:	
Check the <u>Service NSW website</u> for possible disaster business grants	
Check COORDINARE website for any new disaster recovery support	
2. Undertake an internal debrief: 1. Were any staff physically injured?	
Yes – Ensure a formal report is submitted	
No –	
2. Have staff experienced a high level of stress?	
Yes – Ensure proper support and leave is given	
No – Allow staff to access recovery services privately	
3. Check in with all staff about mental well-being.	
4. Ensure staff practice self-care and seek help if necessary	
Further information and guidance:	
Listen to staff and allow them to take time off and access counselling	
Self-care during and after emergencies	
Promoting self-care when managing staff during and after emergencie	<u>es</u>
Part C – Mental health in emergencies - See page 16 – 20 of: Managing-	emergencies-in-
general-practice.pdf (racgp.org.au) Resources and training at on trauma at Phoenix Australia	
Contact COORDINARE to access their Employee Assistance Program (E	EAP) available to all
general practice staff in SE NSW	,
View COORDINARE website for guidance on <u>commissioned services</u> an and <u>support</u>	nd further <u>resources</u>
Lifeline - Recovering after a natural disaster	
<u>Communication after Trauma</u> online course	
▶ RACGP GP Support Program	
HealthPathways	
Post Natural Disaster Health - Community HealthPathways Illawarra Sh	<u>ioalhaven</u>
Post Natural Disaster Health - Community HealthPathways ACT and SN	<u>ISW</u>

Improvement Plan Example

1. WHAT ISSUES DID YOU FIND?

This is where you list any of the issues that you discovered through your initial audit. The issues could be based on practice data e.g. Clinical Audit Tools and clinical database audits, cultural audit tool, readiness tool, near misses and patient and/or staff feedback. It could also include issues or challenges identified with internal processes and workflows. Once you have a detailed list you can use it in future Improvement plans.

- Minor water damage to carpet
- · Some documents were water damaged
- · Practice hours reduced for one day for clean up
- Insurance policy didn't cover minor damage
- Some staff unable to attend practice due to road closures

2. WHAT ARE YOU TRYING TO IMPROVE?

Pick one area - Quality Improvement Measure (QIM) you are going to work on. You could pick something from the list you identified above. Other useful resources to help you pick your QIM is your benchmarking report or your Sentinels Practice Data Sourcing (SPDS) quarterly data quality snapshot.

• The damage caused to practice infrastructure by future floods

3. WHAT IS YOUR BASELINE?

In order to measure your improvement you need to know where you are starting from. Without measuring, it is impossible to know whether the change has resulted in an improvement.

Water was able to damage carpets, some furniture and storage boxes, resulting in the practice being unable to operate.

4. SET YOUR GOAL

Use SMART goal setting to ensure your goal is specific (S), measurable (M), achievable (A), realistic (R) and time based (T).

To increase flood preparedness and safety at the practice, by introducing flood mitigation strategies by March 2023.

5. IMPROVEMENT PLAN - START DATE

1 October 2022

6. IMPROVEMENT PLAN - END DATE

1 March 2023

7. WHO IS YOUR PRACTICE CHAMPION

This is the staff member who is dedicated to leading the work.

The practice Principal.

8. WHAT WILL YOUR PRACTICE CHAMPION DO?

Provide an overview of the actions and responsibilities of the Practice Champion for the duration of the Improvement Plan

Overall co-ordination of the project,

Collaborate with practice manager to undertake a risk identification activity re potential damage to infrastructure,

Authorise purchases and repairs,

Negotiate with insurance companies.

9. WHO WILL BE SUPPORTING THE PRACTICE CHAMPION?

The Practice Champion should consult with the practice team to establish who else in the practice will support the activity and what their role will be. Provide an overview of the actions and responsibilities of any other staff that will be supporting the Practice Champion for the duration of the Improvement Plan.

Practice Manager - Collaborate with the practice Principal to undertake a review of risks; Contact key organisations and obtain information on flood mitigation strategies for commercial buildings in the area; Check RACGP standards; Source capital items and contractors for repairs; Review insurance policy and potentially obtain other quotes; Review storage of paper records; Co-ordinate the activities of other staff.

Practice Nurses - Review risks in the treatment rooms.

Reception - Review risks in the reception area.

10. HOW WILL YOU COMMUNICATE YOUR PROGRESS?

Provide an overview of how you will communicate any issues or concerns, as well as share your results and progress with both your practice team and external stakeholders like patients and COORDINARE.

Email.

Time allocated on regular team meeting agendas to provide updates to whole of team.

Folder to be established on C Drive for all staff to keep documents related to this QI activity.

11. HOW OFTEN WILL YOUR PRACTICE TEAM MEET?

Provide an overview of how often your practice team will meet. Consider an ongoing / recurring calendar appointment for the duration of the Improvement Plan.

Fortnightly

Improvement Plan Template

If you are setting more that one goal, click here to download the template.

PRACTICE NAME:

1. WHAT ISSUES DID YOU FIND?

This is where you list any of the issues that you discovered through your initial audit. The issues could be based on practice data e.g. Clinical Audit Tools and clinical database audits, cultural audit tool, readiness tool, near misses and patient and/or staff feedback. It could also include issues or challenges identified with internal processes and workflows. Once you have a detailed list you can use it in future Improvement plans.

2. WHAT ARE YOU TRYING TO IMPROVE?

Pick one area - Quality Improvement Measure (QIM) you are going to work on. You could pick something from the list you identified above. Other useful resources to help you pick your QIM is your benchmarking report or your Sentinels Practice Data Sourcing (SPDS) quarterly data quality snapshot.

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In order to measure your improvement you need to know where you are starting from. Without measuring, it is impossible to know whether the change has resulted in an improvement.

4. SET YOUR GOAL

Use SMART goal setting to ensure your goal is specific (S), measurable (M), achievable (A), realistic (R) and time based (T).

5. IMPROVEMENT PLAN - START DATE

6. IMPROVEMENT PLAN - END DATE

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This is the staff member who is dedicated to leading the work.

8. WHAT WILL YOUR PRACTICE CHAMPION DO?

Provide an overview of the actions and responsibilities of the Practice Champion for the duration of the Improvement Plan

9. WHO WILL BE SUPPORTING THE PRACTICE CHAMPION?

The Practice Champion should consult with the practice team to establish who else in the practice will support the activity and what their role will be. Provide an overview of the actions and responsibilities of any other staff that will be supporting the Practice Champion for the duration of the Improvement Plan.

10. HOW WILL YOU COMMUNICATE YOUR PROGRESS?

Provide an overview of how you will communicate any issues or concerns, as well as share your results and progress with both your practice team and external stakeholders like patients and COORDINARE.

11. HOW OFTEN WILL YOUR PRACTICE TEAM MEET?

Provide an overview of how often your practice team will meet. Consider an ongoing / recurring calendar appointment for the duration of the Improvement Plan.



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