# Infection Control

Infection Control Toolkit for General Practice





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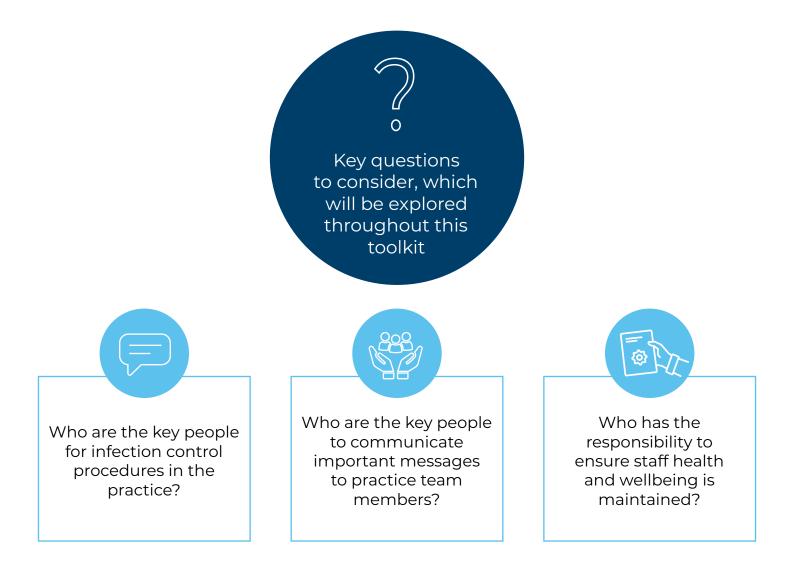
COORDINARE acknowledges that this resource has been adapted from the Disaster Prepare Toolkit developed by Brisbane South PHN.

Please note: due to constant developments in research and health guidelines, information in this document may be subject to change. Please contact info@coordinare.org.au if you have any feedback regarding the content of this document.

## 1. Aim of this toolkit

## To review your practice systems to ensure infection control and safe work environments are maintained during the pandemic.

Infection prevention and control plays an important role in delivering safe health services so that patients, clinicians, and practice staff are prevented from being harmed by avoidable infection. It is vital to ensure that practices regularly review risks within their facilities, that all staff understand their responsibilities and are educated and competent in relation to effective infection prevention and control. The arrival of COVID-19 has placed an additional emphasis on the importance of effective infection control and the requirement for practices to review procedures and maintain best practice in line with current evidence.



## 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 <u>here.</u><sup>§</sup>

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.



## 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:

## **The Improvement Plan**

This template supports you to identify areas for improvement, set SMART goals and monitor improvements over time

## 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

HealthPathways 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.

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 Username: together Password: forhealth Illawarra Shoalhaven Username: connected Password: 2pathways

## 5. How to use this toolkit

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

- The toolkit is broken down in to 12 sections covering various components of infection control
- Each section has a series of activities designed to help you reflect on your practice processes so you can identify areas for improvement
- Each activity contains checklists and resources that will help guide you along the journey
- Once you have completed the simple reflection activities you will reach the end of the section. Now you have identified possible areas for improvement you could consider setting a goal using using COORDINAREs Quality Improvement Methodology (QIM) to develop your Improvement Plan.

Look out for this symbol as a prompt to consider writing up an Improvement Plan

- Remember to get in touch with your HCC if you need help with these activities and supporting tools.
- If you find your process is not working and you are not seeing improvements, then review your process and start again.

## 6. Infection control activities

Infection control is a health and safety issue. All people working in the health service organisation are responsible for providing a safe environment for consumers and the workforce.

Consistent and correct management of infection in general practice is imperative to preventing and controlling the spread of healthcare-associated infections including COVID-19, influenza and hepatitis. Correct and ongoing infection control measures are essential for the health of your patients and staff.

## 6.1. Activity: Personal protective equipment (PPE)

Personal protective equipment (PPE) refers to a variety of barriers (e.g. gloves, water impermeable aprons/gowns, masks, glasses, goggles, face shields, footwear) used to protect mucous membranes, airways, skin, and clothing from contact with blood and body substances. The use and type of PPE depends on the situation and the risk. Appropriate use of personal protective equipment (PPE) is critical in limiting the spread of COVID-19.

#### The aim of this activity is to review the availability and use of PPE in the practice.

	Activity	Things to consider
1.	Do all team members wear PPE appropriate to the patient presentation and as per advice from the local public health unit?	<ul> <li>Refer to:</li> <li><u>Special precautions for COVID-19 Designated Zones</u></li> <li><u>Assessment and management of patients with suspected COVID19</u></li> <li><u>COORDINARE infection control</u></li> </ul>
	Yes, continue with next activity	HealthPathways - Infection control and staff exposure or infection: Illawarra-Shoalhaven Health Pathways
	No, refer to the 'Things to consider' in next column	<u>ACT-Southern NSW HealthPathways</u>
2.	Have all team members received training in the different types of PPE and when to use them? Yes, continue with next activity No, refer to the 'Things to consider' in next column	<ul> <li>Refer to:</li> <li>RACGP infection prevention and control standards</li> <li><u>Guidance on the use of PPE for healthcare workers in the context of COVID-19 (June 2021)</u></li> <li>A 30-minute Australian Government COVID-19 infection control online training for health care workers in all settings. It covers the fundamentals of infection prevention and control for COVID-19</li> <li>COORDINARE infection control webinars for general practice March -June 2022</li> <li>Document training completed and included in individual team files.</li> </ul>
3.	Have all team members been trained in donning and doffing PPE? Yes, continue with next activity	<ul> <li>COORDINARE <u>infection control webinars</u> for general practice March-June 2022.</li> <li>Correct use of PPE<u>video</u></li> </ul>
	No, refer to the 'Things to consider' in next column	

	Activity	Things to consider
4.	Do all team members dispose of all used PPE in accordance with standard precautions? Yes, continue with next activity	Refer to RACGP infection prevention and control standards.
	No, refer to the 'Things to consider' in next column	
5.	Do you know where to order PPE? Yes, continue with next	Refer to information from COORDINARE in relation to sourcing PPE.
	activity No, refer to the 'Things to consider' in next column	
6.	Is the use of PPE included in staff orientation forms? Yes, continue with next	Review and update staff orientation forms.
	activity No, refer to the 'Things to consider' in next column	
7.	Are there sufficient signs and visual aids on correct use of PPE displayed in all treatment rooms?	Refer to <u>resources</u> from RACGP.
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
		Use COORDINARE's <u>Quality Improvement Methodology (QIM)</u> and <u>Improvement plan</u> <u>template</u> to develop your Improvement Plan.
PPE	r reviewing your practice's use of , are there any changes you Id like to implement?	
	Yes, set goals and outline actions e taken	
activ	No, you have completed this <i>v</i> ity	

## 6.2. Activity: Triage

Triage is the process used to evaluate and prioritise the urgency of patients' needs. A key element of a good triage process is consistency across the practice team. You cannot rely on staff 'common sense' as a training or induction strategy.

The aim of this activity is to review your practice's triage procedures.

	Activity	Things to consider
1.	Have all practice team members been trained in triage? Has this been documented?	Refer to Hotdoc – <u>triage in general practice</u> .
	Yes, continue with next activity.	
	No, refer to the 'Things to consider' in next column	
2.	Do you have a triage chart available at reception?	<u>Triage chart.</u>
	Yes, continue with next activity.	
	No, refer to the 'Things to consider' in next column	
3.	Do reception staff have access	Refer to Assessment and management of patients with suspected COVID-19.
	to a COVID-19 symptom checklist?	See COVID-19 on contents list or use as search function.
	Yes, continue with next	Illawarra-Shoalhaven HealthPathways
	activity	ACT-Southern NSW HealthPathways
	No, refer to the 'Things to consider' in next column	
4.	Is your triage process up to date in the practice policy &	Update policy and procedure manual.
	procedure manual?	Who has the responsibility to complete this?
	Yes, continue with next activity	When will it be completed by?
	No, refer to the 'Things to consider' in next column	
		Use COORDINARE's <u>Quality Improvement Methodology (QIM)</u> and <u>Improvement plan</u> <u>template</u> to develop your Improvement Plan.
proc	r reviewing your practice's triage cedures, are there any changes would like to implement?	
	Yes, set goals and outline actions e taken	
activ	No, you have completed this <i>v</i> ity	

## 6.3. Activity: Protecting patients and team members

Preventive measures include physical or social distancing, quarantining, ventilation of indoor spaces, covering coughs and sneezes, hand washing, and keeping unwashed hands away from the face are all needed when managing COVID-19.

The aim of this activity is to review your practice's prevention and measures for protecting patients and team members from COVID-19.

	Activity	Things to consider
1.	Have you completed RACGP's checklist on keeping your practice COVID-19 safe? Yes, continue with next activity. No, refer to the 'Things to consider' in next column	Refer to RACGP – keeping your practice COVID-19 safe <u>resource</u> . This resource provides practices with a list of infection prevention and control measures to consider and implement throughout the course of the current COVID-19 pandemic to maintain a healthy work environment.
2.	Do you have a dedicated clinic for those patients who are symptomatic? Yes, continue with next activity. No, refer to the 'Things to consider' in next column	Consider if this option would work for your practice. Provide details of how you could implement this:
3.	Do you have an alternative entrance and exit points for patients with symptoms? Yes, continue with next activity No, refer to the 'Things to consider' in next column	Consider if this option would work for your practice. Provide details of how you could implement this:
4.	Do you provide car park appointments for patient triage, assessment or testing? Yes, continue with next activity No, refer to the 'Things to consider' in next column	Consider if this option would work for your practice. Provide details of how you could implement this:
5.	Do you provide telehealth appointment? Yes, continue with next activity No, refer to the 'Things to consider' in next column	Contact <u>Healthdirect to discuss</u> telehealth options. Refer to <u>MBS telehealth</u> information. Illawarra-Shoalhaven HealthPathways <u>COVID19 Telehealth</u> ACT-Southern NSW HealthPathways <u>COVID19 Telehealth</u>

	Activity	Things to consider
6.	Do you have a screening process including meaningful screening questions to ask patients when booking appointments in order to triage appropriately?	How do you triage patients? Who has the responsibility to do this?
	Yes, continue with next activity	Is your system working well?
	No, refer to the 'Things to consider' in next column	Yes No
		Meet with key people in your practice to discuss how you can triage symptomatic patients over the phone. Discuss who would have responsibility to triage and how this would be done.
		Refer to Assessment and management of patients with suspected COVID-19.
7.	If patients present at the	Have a supply of masks and hand sanitiser at the practice entryway.
	practice who are symptomatic, do you ensure they put on a mask and perform hand hygiene prior to entering the practice?	Print and display do not enter <u>poster</u> at your practice.
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
8.	Do you have policy and procedures on protecting patients and staff in your	Review manual to include procedures. Who will do this?
	practice manual? Yes, continue with next activity	When will it be completed?
	No, refer to the 'Things to consider' in next column	
		Use COORDINARE's <u>Quality Improvement Methodology (QIM)</u> and <u>Improvement plan</u> <u>template</u> to develop your Improvement Plan.
proo and	r reviewing your practice's cedures for protecting patients staff, are there any changes you ald like to implement?	
	Yes, set goals and outline actions e taken	
activ	No, you have completed this ⁄ity	

## 6.4. Activity: CO2 & HEPA filters

People infected with coronavirus can spread it around a room in tiny airborne droplets called "aerosols" when they breathe out, speak, shout or sing.

People also breathe out CO2. If there is a build-up of CO2 in an area it can indicate that ventilation needs improving. CO2 monitors don't measure levels of coronavirus but using them can tell you if an area needs improved ventilation.

An air purifier with a HEPA filter can be surprisingly good at trapping viruses and bacteria out of the air.

#### The aim of this activity is to identify the benefits of using CO2 and HEPA filters in your practice.

	Activity	Things to consider
1.	Does your practice have a CO2 monitor to measure air ventilation to reduce the risk of spreading COVID-19?	Optimise ventilation and air-circulating strategies: open windows and doors, increase air movement wherever possible. Refer to:
	Does your practice have a HEPA filter to purify the air? Yes, continue with next activity No, refer to the 'Things to consider' in next column	<ul> <li>Infection control <u>measures</u> to optimise ventilation and reduce transmission of COVID-19 in acute healthcare settings.</li> <li>OzSAGE - Safer Indoor Air for Work Spaces Workflow <u>Infographic</u></li> <li>OzSAGE - <u>Creating Safe Your Workplaces during the COVID-19 Pandemi</u>c</li> <li>OzSAGE - Safe Indoor Air (<u>Ventilation</u>)</li> <li>University of Melbourne - <u>Guide to air cleaner purchasing</u>.</li> </ul>
After reviewing your practice's use of CO2 and HEPA filters, are there any changes you would like to implement? Yes, set goals and outline actions to be taken No, you have completed this activity		Use COORDINARE's <u>Quality Improvement Methodology (QIM</u> ) and <u>Improvement plan</u> . <u>template</u> to develop your Improvement Plan.

## 6.5. Activity: Hygiene

Effective hand hygiene, using soap and water, antiseptic hand wash or alcohol-based hand rubs or wipes, has been proven to reduce the spread of infection. Easy access to hand-hygiene facilities enables staff to clean their hands more reliably.

#### The aim of this activity is to review your practice's hand hygiene procedures.

	Activity	Things to consider
1.	Do you encourage appropriate hand hygiene? Yes, continue with next activity No, refer to the 'Things to consider' in next column	Outline how you do this: Are there any changes to your current procedures you would like to make? Yes No Who has the responsibility to make these changes?
2.	Do you have posters at all the sinks? Yes, continue with next activity No, refer to the 'Things to consider' in next column	Refer to the Australian Commission on Safety and Quality in Health Care information on <u>hand hygiene</u> . Provide training to all practice team members. Make sure this training is documented.
3.	Do you have posters at all of your sinks and hand rub stations? Yes, continue with next activity No, refer to the 'Things to consider' in next column	Refer to Hand Hygiene Australia's <u>poster.</u>
4.	Do you promote cough etiquette? Yes, continue with next activity No, refer to the 'Things to consider' in next column	<ul> <li>Refer to:</li> <li>Poster - <u>how to avoid spreading COVID-19</u> (healthdirect)</li> <li>Poster - <u>Cover your cough or sneeze.</u></li> <li>Ensure all team members receive training in cough etiquette.</li> </ul>
5.	Do you have hand sanitiser available in multiple places throughout the practice? E.g. reception, consulting rooms, treatment room, lunch room etc. Yes, continue with next activity No, refer to the 'Things to consider' in next column	Review regular "touch" locations and populated places and ensure hand sanitiser is available.

	Activity	Things to consider
6.	Do you need more information on maintaining hand hygiene? Yes, continue with next activity	<ul> <li>Refer to:</li> <li>RACGP infection prevention and control standards</li> <li>Hand Hygiene Australia</li> <li>National Hand Health Hygiene Initiative.</li> </ul>
	No, refer to the 'Things to consider' in next column	
7.	Have all members of the practice team, including GPs, nurses, reception and cleaning staff, participated in infection-control training? Yes, continue with next activity No, refer to the 'Things to consider' in next column	<ul> <li>Refer to:</li> <li><u>e-learning modules on the principles of infection prevention and control</u></li> <li>COVID-19 infection control <u>training.</u></li> <li>COORDINARE <u>infection control workshops</u> for general practice, March-June 2022.</li> </ul>
hyg cha imp to b	er reviewing your practice's hand iene procedures, are there any nges you would like to element? Yes, set goals and outline actions be taken No, you have completed this	Use COORDINARE's <u>Quality Improvement Methodology (QIM)</u> and <u>Improvement plan</u> <u>template</u> to develop your Improvement Plan.

## 6.6. Activity: Cleaning protocols

Practices need to have a current cleaning policy. The cleaning policy should identify practice team member responsibilities, work health and safety issues, procedures for routine scheduled cleaning, unscheduled cleaning and monitoring of effectiveness.

#### The aim of this activity is to review your practice's cleaning protocols.

	Activity	Things to consider
1.	Do you have cleaning products readily available at the practice? Yes, continue with next	Have all team members received training in the safe way to use these? Yes No
	activity	Do you have <u>material safety data (MSD)</u> sheets available?
	No, refer to the 'Things to consider' in next column	Yes No
2.	Are frequently used surfaces cleaned regularly? (e.g. door handles, tabletops, light switches, keyboard, mouse, desk, protection screens etc).	Refer to RACGP infection prevention and control standards.         Develop a cleaning schedule to ensure this cleaning is carried out.         Who has responsibility to complete this cleaning?
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
3.	Do you have a documented cleaning schedule displayed in the practice? This should include: area to sign off when cleaning completed, the way the cleaning is to be undertaken and the frequency.	Refer to RACGP infection prevention and control standards.
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
4.	Do staff wear PPE (gloves, eye protection etc.) when preparing and using cleaning products?	Refer to RACGP infection prevention and control standards.
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	

	Activity	Things to consider
5.	Do your practice cleaning policies include:	Update policy & procedure manual.
	<ul> <li>the person(s) with overall responsibility for infection prevention and control for cleaning in the practice</li> <li>work health and safety issues</li> <li>scheduled cleaning</li> <li>unscheduled cleaning</li> </ul>	
	monitoring of outcome.	
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
6.	Do you have a plan on how your practice will manage the cleaning procedures if there is a suspected or confirmed COVID-19 patient in the practice?	Outline what is your plan: Have you tested this plan?
	Yes, continue with next	Yes No
	activity. No, refer to the 'Things to	Are there changes to the plan you would like to implement?
	consider' in next column	Yes       No         Refer to:           Department of Health fact sheet outlining recommendations for cleaning and disinfection of the environment where people suspected or confirmed to have COVID-19 infection may have been.          Hygiene and cleaning for health workforce.
7.	Have all cleaners (employed or contractor), been provided with	Refer to:
	training in relation to adhering to RACGP accreditation and sterilisation guidelines? Yes, continue with next activity No, refer to the 'Things to consider' in next column	<ul> <li><u>RACGP 5th edition accreditation standards</u></li> <li><u>Infection prevention and control standards</u></li> <li>Infection prevention and control eLearning <u>modules</u>.</li> </ul>
		Use COORDINARE's <u>Quality Improvement Methodology (QIM)</u> and <u>Improvement plan</u> <u>template</u> to develop your Improvement Plan.
clea chai	r reviewing your practice's ning protocols, are there any nges you would like to lement?	
	Yes, set goals and outline actions e taken	
l activ	No, you have completed this <i>v</i> ity	

## 6.7. Activity: Emergency kit

General practices need to have equipment appropriate to deal with possible or confirmed infectious diseases ready for use. It is useful for the practice to keep a kit containing the necessary equipment close to reception in a container with the contents clearly labelled, perhaps combined with the practice spill kit. The contents should be checked regularly.

#### The aim of this activity is to review your practice's emergency kit.

	Activity	Things to consider
1.	Does the practice have an emergency kit available?	Has it been checked recently?
		Yes No
	Yes, continue with next activity	Are all practice team members aware of it and where it is located??
	No, refer to the 'Things to consider' in next column	Yes No
		A suggestion emergency kit could include:
		<ul><li>nonsterile disposable gloves</li><li>goggles</li></ul>
		<ul> <li>gown: preferably disposable and long sleeved with cuffs</li> </ul>
		masks: regular surgical masks for patient use and P2/N95 masks for use by doctors, health professionals and other staff for protection against airborne diseases
		tissues: for general use in promoting respiratory etiquette
		waste bin lined with a plastic bag: for disposing of used tissues
		alcohol-based hand rub or wipes for hand hygiene
		water and detergent spray and/or wipes
		<ul> <li>alcohol wipes or disinfectant spray for treating surfaces after contact with an infectious patient</li> </ul>
		yellow biohazard bags for disposal of contaminated items and to line the bin
		disinfectant
		detergent
		bottles of clean water
		<ul> <li>battery powered radio (including spare batteries)</li> </ul>
		torches (including spare batteries)
		fully charged mobile phone
		fire extinguisher
		small supply of office stationery
		prescription pad.
		RACGP – Infection prevention and control standards.
2.	If practice team members are required to work remotely,	Review the list of suggested items and identify beneficial things.
	have you considered what "emergency" items would be	Collate enough emergency kits for all relevant team members.
	beneficial for them?	Who will have the responsibility to complete this task?
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	

### Activity



### Things to consider

Use COORDINARE's <u>Quality Improvement Methodology (QIM)</u> and <u>Improvement plan</u> <u>template</u> to develop your Improvement Plan.

After reviewing your practice's emergency kit, are there any changes you would like to implement?

Yes, set goals and outline actions to be taken

No, you have completed this activity

## 6.8. Activity: Waste management

Effective and safe waste management is important not only to reduce the risk of infection to staff and patients, but also to reduce the impact on the environment and reduce costs.

The aim of this activity is to review your practice's waste management procedures.

	Activity	Things to consider
1.	Do you have waste management protocols?	Outline your protocols:
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	Do all staff understand these?
	countri	Yes No
		How do you ensure these are followed?
		Refer to:
		CDNA National guidelines
		Illawarra-Shoalhaven HealthPathways - Waste Management
		RACGP – <u>Infection prevention and control standards</u> – standard 3.4.
2.	Do all team members know the difference between clinical and general waste?	Refer to:
		RACGP – waste management <u>toolkit.</u>
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next	
	column	
3.	Have all team members received education and training in handling and disposal of waste?	Refer to infection control training elsewhere in this document.
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
4.	Are bins available to ensure all team	Review bin allocations to ensure there are adequate general and clinical waste
	members can manage waste at the point of generation?	management bins.
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
		Use COORDINARE's <u>Quality Improvement Methodology (QIM)</u> and Improvement plan template to develop your Improvement Plan.
After reviewing your practice's waste management procedures, are there any changes you would like to implement?		
	Yes, set goals and outline actions to be taken	
	No, you have completed this activity	

## 6.9. Activity: Managing the wellbeing of practice team members

The health and safety of staff is a primary concern for all businesses. Practice owners are responsible for the protection of the wellbeing of staff and contract workers involved with the business. Health practitioners cannot give to others if they are experiencing compassion fatigue, so it is advised that self-care and a whole of practice approach be addressed so that patients receive the best care.

#### The aim of this activity is to consider the health and wellbeing procedures in place at your practice.

	Activity	Things to consider
1.	Do you have procedures in place to promote health and wellbeing for team members?	Outline your program:
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	Is it working?
		Yes No
		Refer to:
		Health Care Worker COVID-19 Exposure Risk Assessment Matrix to inform decisions regarding staff testing and isolation
		<ul> <li>RACGP – general practice toolkit – module 11 Keeping the doctor alive: A self-care guidebook for medical practitioners provides strategies to deal with stress</li> </ul>
		DOH - Work Permissions & Restrictions <u>framework</u>
		Refer to and encourage all health practitioners to complete the <u>self and</u> <u>organisation care checklist</u>
		<ul> <li>Illawarra-Shoalhaven HealthPathways</li> <li>Medical Practitioner Mental Wellbeing</li> </ul>
		<ul> <li>ACT-Southern HealthPathways</li> <li>Medical Practitioners' Health</li> </ul>
2.	Do you have a buddy system across	Consider if this something that would work in your practice?
	the practice (GP:GP, nurse:nurse, receptionist:receptionist) if one team member needs to take a break?	Identify and buddy up team members.
	Yes, continue with next activity	How will the team be involved? Include how you will communicate the system to the team.
	No, refer to the 'Things to consider' in next column	
3.	Are all team members taking adequate rest between shifts?	Review the workloads of all practice team members to ensure there are adequate breaks between shifts.
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
4.	Do you have procedures in place for dealing with difficult, irate, and abusive patients?	Refer to information on <u>managing difficult patients</u> – Avant.
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	Ensure all staff receive training in handling difficult patients and are aware of the practice's policy and procedures.

Activity	Things to consider
	Use COORDINARE's <u>Quality Improvement Methodology (QIM)</u> and Improvement plan template to develop your Improvement Plan.
After reviewing your practice's management of health and wellbeing for team members, are there any changes you would like to implement?	
Yes, set goals and outline actions to be taken	
No, you have completed this activity	

## 6.10. Activity: Mandatory COVID-19 vaccinations

All primary care and private sector health service providers are required to be vaccinated against COVID as outlined by NSW Health.

The aim of this activity is to review your practice's management of the mandatory COVID-19 vaccination.

	Activity	Things to consider
1.	Are all practice team members on track to meet the mandatory vaccine requirements?	Refer to: Workers in health care setting – <u>vaccine requirements.</u>
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
2.	Has someone in the practice sighted evidence of the vaccines?	Refer to: NSW Health – <u>providing evidence of mandatory vaccines.</u>
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
3.	Has this been recorded in the staff file?	Refer to: RACGP – <u>staff immunisation records template.</u>
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
4.	Have you communicated the NSW government guidelines to staff and provided practice team members with helpful information about mandatory vaccines?	Refer to <u>guidelines.</u>
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
5.	Have you updated your practice policy to reflect the mandatory requirements?	Update policy & procedure manual and any associated employment documents.
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
		Use COORDINARE's <u>Quality Improvement Methodology (QIM)</u> and Improvement plan template to develop your Improvement Plan.
After reviewing your practice's management of mandatory COVID-19 vaccinations, are there any changes you would like to implement?		
ľ	Yes, set goals and outline actions to be taken	
I	No, you have completed this activity	

## 6.11. Activity: Staff roles and responsibilities

It is suggested to have documented roles and responsibilities when managing an outbreak of COVID-19. This assist with identifying who should do what. It is also suggested that there is a backup person if the main person is unavailable.

The aim of this activity is to review roles and responsibilities and ensure staff have been delegated roles.

	Activity	Things to consider
1.	Have you identified ALL practice team member's strengths?	Create a list of all practice team members and identify their strengths. This may be done in consultation with the team member.
	Yes, continue with next activity	Do all team members understand their role?
	No, refer to the 'Things to consider' in next column	Yes No
2.	Have you considered who will do particular roles? Including (but not limited to):	Review your COVID-19 Safety Plan.
	<ul> <li>keeping up to date with latest COVID-19 news,</li> <li>key contact with PHN,</li> <li>ordering supplies &amp; PPE,</li> <li>cleaning,</li> <li>practice communications,</li> <li>managing staff wellbeing,</li> <li>managing IT queries,</li> <li>arranging training,</li> <li>Please be aware that if the responsibilities can be delegated and shared, this can save everything landing on one person.</li> <li>Yes, continue with next activity</li> <li>No, refer to the 'Things to consider' in next column</li> </ul>	Ensure all team members fully understand their roles and responsibilities.
3.	Do you have a backup for each person's role, in case the key person is unavailable? Yes, continue with next activity No, refer to the 'Things to consider' in next column	Review the task list to ensure backup person is in place.
resp	er reviewing your practice staff roles and ponsibilities, are there any changes you would to implement?	Use COORDINARE's <u>Quality Improvement Methodology (QIM)</u> and <u>Improvement plan template</u> to develop your Improvement Plan.
	Yes, set goals and outline actions to be taken	
	No, you have completed this activity	

## 6.12. Activity: Policy & procedures

The aim of this activity is to review your practice's policy and procedure manual for currency.

	Activity	Things to consider
1.	Is the policy and procedure manual/s up to date? Ensuring any new COVID-19 requirements are included.	Update policy and procedure manual. Who will have responsibility to complete this?
	Yes, continue with next activity No, refer to the 'Things to consider' in next column	When will this be completed?
2.	Do all practice team members have access to the P&P manual/s, even if they are working remotely?	Consider how every team member can access the manual/s remotely. Discuss with IT provider how this could work for your practice.
	Yes, continue with next activity No, refer to the 'Things to consider' in next column	
3.	Do you have a process for informing existing team members of changes to the policy and procedures? Yes, continue with next activity	Develop a process for communicating to all team members any changes to policy & procedures.
	No, refer to the 'Things to consider' in next column	
4.	Does your induction process include ensuring new team members read the policy & procedure manual?	Update induction checklist/paperwork to ensure reading of policy and procedure manual.
	Yes, continue with next activity	
	No, refer to the 'Things to consider' in next column	
E		Use COORDINARE's <u>Quality Improvement Methodology (QIM)</u> and Improvement plan template to develop your Improvement Plan.
After reviewing your practice's policies and procedures manual, are there any changes you would like to implement?		
	Yes, set goals and outline actions to be taken	
	No, you have completed this activity	

## 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.

- · The practice has a number of new staff and also some roles have recently changed, hence we now have
- some staff who require training in infection control.

#### 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.

Staff knowledge of infection control.

#### **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.

Of our 4 staff who are responsible for managing the practice's infection control procedures, only 2 have up to date training.

#### 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).

All 4 staff will be up to date with infection control training.

#### 5. IMPROVEMENT PLAN – START DATE

1 April 2022

#### 6. IMPROVEMENT PLAN – END DATE

30 June 2022

## 7. WHO IS YOUR PRACTICE CHAMPION

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

Natalie, Practice Manager.

### 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

Identify sources of training for staff by checking the following:

- Contact COORDINARE to find out about upcoming infection control training March to June 2022.
- e-learning modules on the principles of infection prevention and control
- Investigate NSW Health COVID-19 infection control training.
- Check COORDINARE's website to find sources of training <a href="https://www.coordinare.org.au/for-health-professionals/guality-and-safety/infection-control/">https://www.coordinare.org.au/for-health-professionals/</a> guality-and-safety/infection-control/
- Look websites for sources of training: APNA, AAPM, Marjen.

HealthPathways - Infection control and staff exposure or infection:

Illawarra-Shoalhaven Health Pathways ACT-Southern NSW HealthPathways

Enrol staff in the selected training and book time for them to participate.

Update practice records to confirm training has been completed.

### 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.

The practice nurse, Cindy.

#### **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.

At team meetings.

#### **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.

Monthly.

## Improvement Plan Template

If you are setting more that one goal, <u>click here</u> 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.

#### **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.

### **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

### 7. WHO IS YOUR PRACTICE CHAMPION

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.

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



## COORDINARE – South Eastern NSW PHN

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