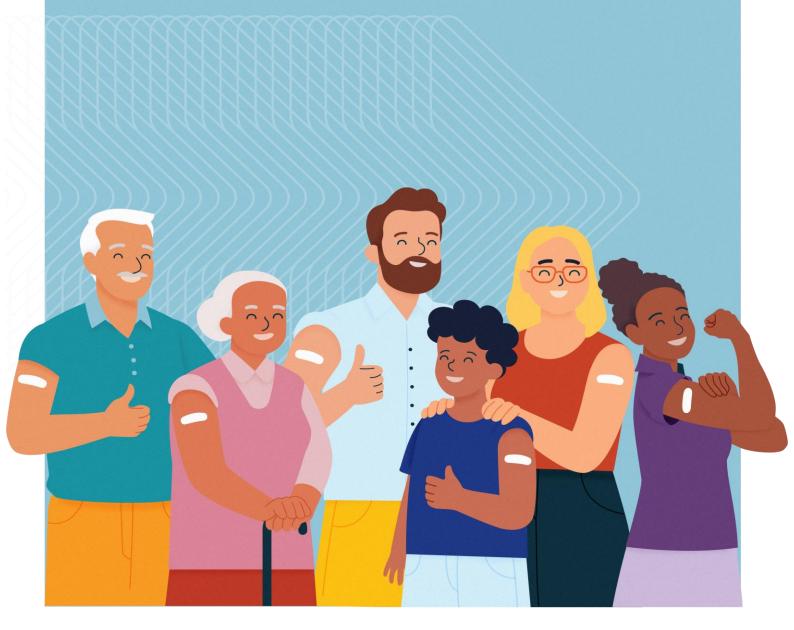
Winter Preparedness

Continuous Quality Improvement toolkit

The aim of the **Western Sydney Winter Preparedness Toolkit** is to equip primary care providers with practical resources and strategies to effectively manage, support, and improve patients outcome over the winter period in primary care settings through a continuous quality improvement (CQI) approach









WentWest, the Western Sydney Primary Health Network, acknowledges the First Nations peoples of Australia as the Traditional Custodians of the land on which we work and live. We pay our respect to Elders past, present and future and extend that respect to all Aboriginal and Torres Strait Islander peoples within western Sydney.



Acknowledgements

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Where to get help?

Western Sydney Primary Health Network

E: support@wentwest.com.au

P: (02) 8811 7117

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Why Winter Preparedness is Important?

Protecting Our Community from COVID-19, Influenza & Pneumococcal Disease

As winter approaches, a proactive strategy is essential to reduce the impact of COVID-19, Influenza, and pneumococcal disease—key drivers of severe illness and hospitalisations, especially in vulnerable populations.

Primary Care Providers play a vital role in supporting their patients by promoting timely vaccinations and ensuring at-risk individuals are protected.

Who's Most at Risk?



Residents of Residential Aged Care Homes



Older adults (65+)



First Nations people



Culturally & Linguistically Diverse people



Immunocompromised



Homeless



Young children & pregnant women



People with chronic conditions

Why It Matters for Western Sydney

- Higher chronic disease rates increase susceptibility to severe infections.
- Flu hospitalisations rose by 30% in 2023, with young children & older adults most affected.¹
- COVID-19 waves continue to strain hospitals and aged care.
- Pneumococcal disease is a leading cause of preventable hospital admissions

Important Information

Toolkit Instructions

Each module includes practical, self-directed activities designed to help primary care providers implement sustainable CQI practices.

Starting Points:

1. Engaged Leadership

Meet as a team to assign a QI lead and choose a relevant activity from the content page above.

2. Data-Driven Improvement

Use **CAT4** data reports to identify target patient cohorts and complete the Measuring Outcomes table to track progress.

3. Patient Registration

Use reminders and recalls engaging patients, support $\underline{\textbf{MyMedicare}}$ registration, and provide education.

4. Team-Based Approach

Review <u>HealthPathways</u> and complete training if needed. As a team, set SMART goals, measures, and change ideas using the <u>Model for Improvement</u>. Test small changes using <u>Plan-Do-Study-Act (PDSA) cycles</u>.

Ending Points: Involve staff, complete the Group Reflection table, and **celebrate** success—no matter how small!

Tip - RACGP CPD: Measuring Outcomes

Collaborate with multiple General Practitioners (GPs), nominate a General Practice (GP) lead, and complete at least two PDSA cycles.

 $^{^{1}\,\}underline{\text{https://ncirs.org.au/sites/default/files/2024-10/NCIRS\%20Annual\%20Immunisation\%20Coverage\%20Report\%202023.pdf}$

Pre-Activity: Immunisation Checklist

By following these steps, healthcare providers can ensure timely vaccine administration, maintain appropriate stock levels, and improve immunisation coverage among eligible patients over the winter period. For a comprehensive checklist – refer to WentWest General Practice Nurse Support Toolkit -

Implementation Steps	COMPLETED
Clinicians can access and review <u>HealthPathways</u> the latest vaccination guidelines	
COVID-19 Influenza (flu) Pneumococcal	
Access and review Australian Immunisation Handbook information.	
COVID-19 Influenza (flu) Pneumococcal	
Identify at-risk patients eligible for vaccination programs (Download NSW immunisation schedule) Access Module 1	
Ensure all staff involved in vaccine management are trained in vaccine <u>cold chain management</u> (including receipt of vaccine deliveries) and update any other required training (CPR & First Aid)	
Assign roles: Nurse for vaccine administration and monitoring, and reception staff for bookings and data entry.	
Obtain access to the Australian Immunisation Register (AIR) through PRODA if not already set up and link to Practice Management Software Access Module 2	
Service the fridge (if overdue), complete the annual audit , discard expired vaccines, report expired NIP vaccines on the State Vaccine Centre portal	
Check fridge capacity, calculate required vaccines, <u>order</u> for a 4-week supply, and verify batch numbers in the software.	
Allocate time over 13 weeks to deliver 960–1,030 vaccinations via onsite (3 clinics/week) and fortnightly outreach clinics (i.e. Residential Aged Care Home)	
Send communication to all patients, reminding them of vaccination importance and practice vaccination arrangements (clinic hours, booking link). Access Module 3	
Advertise via social media, website, in-practice posters, and order printed resources for your clinic. Access Module 3	
Send targeted reminders to pre-identified patients and offer opportunistic vaccines during routine appointments Access Module 3	
Commence vaccination clinics and track vaccination progress at 30 and 60 days to see if you are reaching vaccination target (1000 vaccinations)	
Report all vaccinations to the <u>AIR</u> , use the <u>VAE form</u> if required, and notify any adverse events to your local public health unit at 1300 066 055.	
Review patient uptake with follow-up reminders, reorder vaccines based on stock levels and create a waitlist if demand exceeds supply.	

Module 1

Understanding your population

On completion of this module, you will:

- · Understand the vaccination needs of your vulnerable population and create an effective register.
- Use CAT4 to identify vulnerable patients who are due/overdue for immunisation
- Track vaccination progress at 30 and 60 days to meet vaccination target, estimate stock needs, and enable timely reordering.

Note: when using, considering these filtering options:

- Removing the "Active (3x 2 years) under 'Activity' for new or infrequent patients.
- Selecting Medicare card holders only (filter: 'Medicare No' under 'Health Cover').
- Selecting MyMedicare registered patients

Who Should Get Vaccinated

The National Immunisation Program (NIP) offers free vaccines to eligible individuals including:

COVID-19 (frequency)

- People aged 65+ years (every 6 months)
- People aged 18-64 years with severe immunocompromise (every 6 months)
- People aged 18-64 years without severe immunocompromise (every 12 months)
- Children aged 5-17 years with severe immunocompromise (every 12 months)
- Not recommended for children aged under 5 years

Influenza Vaccination (frequency)

(Annually once per year)

- Children aged 6 months to 5 years
- Pregnant women
- People aged 65+ years
- Aboriginal and Torres Strait Islander people aged 6months+
- People aged 5+ with chronic conditions e.g., asthma, diabetes, heart disease

COVID-19 Booster (frequency)

- People aged 75+ years (every 6 months)
- People aged 65-74 years (every 12 months, can receive every 6 months)
- People aged 18-64 years without severe immunocompromise (every 12 months)
- People aged 18-64 years with severe immunocompromise (every 12 months, can receive every 6 months)
- People aged 5-17 years with severe immunocompromise (every 12 months)

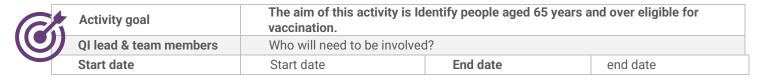
Pneumococcal (frequency)

(Once with a possible booster based on health condition)

- People aged 70+ years
- Aboriginal and Torres Strait Islander adults aged 50+
- People with chronic medical conditions e.g., heart disease, diabetes, cancer, immunocompromised individuals
- Children <u>refer HealthPathways childhood</u> <u>immunisation program</u>

For advice about immunisation, phone Immunisation Advice Line 1800-679-477 or WSLHD <u>Public Health Unit</u> 1300-066-055 ask to speak to an immunisation nurse. Content accurate as per 25 March 2025. Visit <u>NSW Immunisation Schedule</u>. <u>Australian Immunisation Handbook</u> or <u>NSW Health Flu webpage</u>. <u>Pneumococcal Vaccination Handbook</u>, and <u>COVID-19</u> <u>Vaccination Guidelines</u> for latest information.

1.1 Activity – People aged 65 years and over



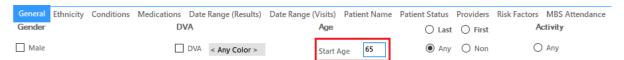
CAT4 Recipe:

Complete the below table by **logging** into Pen CS <u>CAT4</u> → Show Extracts → load latest data extract → Hide Extract

Under 'General' tab → 'Activity' tab→ select 'Active (3x in 2yrs)' OR 'Patient Status' tab → tick 'Registered with MyMedicare'



2. Under 'General' tab → Age → Start Age "65"



- (optional filtering):
 - ightharpoonup Under 'General' tab ightharpoonup 'Ethnicity' tab ightharpoonup Indigenous Status ightharpoonup select 'Non-Indigenous' under



4. Date Range (results) → e.g. select 12mths -

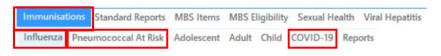
NOTE: Western Sydney HealthPathways Immunisation for vaccine schedule recommendations



5. Recalculate

In Report section

"Immunisations" tab → select Influenza or Pneumococcal At Risk or COVID 19



- 7. Select 'Not Recorded' \rightarrow Export \rightarrow XLS File \rightarrow Save (e.g. Create a folder C:/ClinicalAudit/CAT Patient FollowUp)
- 8. Optional: Create a prompt to display in Topbar
- 9. Optional: Optional: Use the **Measuring Outcomes table** to track progress and support **self-reflection** over time.



WentWest provides regular PIPQI reports benchmarking your influenza immunisation rates for patients 65+ against other practices in our region. Contact us via support@wentwest.com.au to receive this report.

1.2 Activity - First Nations people



CAT4 Recipe:

Complete the below table by **logging** into Pen CS <u>CAT4</u> → Show Extracts → load latest data extract → Hide Extract

> In Filter section

 'General' tab → Under 'Activity' → select 'Active (3x in 2yrs)'* → or 'Patient Status' tab → tick 'Registered with MyMedicare



2. "Ethnicity" tab → Indigenous Status → select "Indigenous" under



3. Date Range (results) \rightarrow e.g. select 12mths -

NOTE: Western Sydney HealthPathways Immunisation for vaccine schedule recommendations

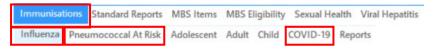


4. Recalculate



In Report section

5. "Immunisations" tab \rightarrow select Influenza or Pneumococcal At Risk or COVID 19

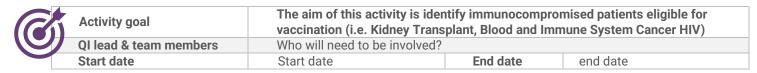


- 6. Select 'Not Recorded' → Export → XLS File → Save (e.g. Create a folder C:/ClinicalAudit/CAT Patient FollowUp)
- 7. Optional: Create a prompt to display in Topbar
- 1. Optional: Optional: Use the Measuring Outcomes table to track progress and support self-reflection over time...



Use the immunisation period as an opportunity to enrol patients with chronic conditions into MyMedicare

1.3 Activity - Immunocompromised



CAT4 recipe: Complete the below table by **logging** into Pen CS $\underline{\textbf{CAT4}} \rightarrow \textbf{Show Extracts} \rightarrow \textbf{load latest data extract} \rightarrow \textbf{Hide Extract}$

> In Filter section

 'General' tab → Under 'Activity' → select 'Active (3x in 2yrs)'* → or 'Patient Status' tab → tick 'Registered with MyMedicare'



Conditions tab → Chronic → Kidney Disease → select "Kidney Transplant"



And/Or Conditions tab \rightarrow Cancer \rightarrow "Blood and Immune System" select Yes



And/OR Conditions tab \rightarrow Other Conditions tab \rightarrow STI Conditions tab \rightarrow select "HIV"



3. Date Range (results) \rightarrow e.g. select 12mths

NOTE: Western Sydney HealthPathways Immunisation for vaccine schedule recommendations

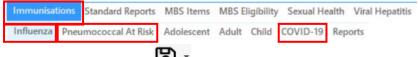


4. Recalculate



In **Report** section

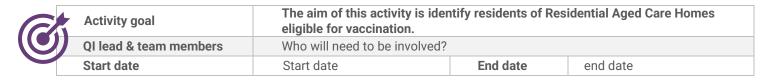
5. "Immunisations" tab → select Influenza or Pneumococcal At Risk or COVID 19



Select 'Not Recorded' → Export → XLS File → Save (e.g. Create a folder C:/ClinicalAudit/CAT Patient FollowUp)

- Optional: <u>Create a prompt to display in Topbar</u>
- 2. Optional: Optional: Use the Measuring Outcomes table to track progress and support self-reflection over time.

1.4 Activity - Residences of Aged Care Home



CAT4 recipe:

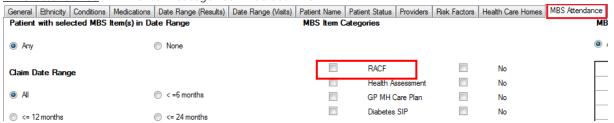
Complete the below table by **logging** into Pen CS <u>CAT4</u> → Show Extracts → load latest data extract → Hide Extract

> In Filter section

 'General' tab → Under 'Activity' → select 'Active (3x in 2yrs)'* → or 'Patient Status' tab → tick 'Registered with MyMedicare'



2. MBS Attendance → MBS item categories → select RACF



3. Date Range (results) \rightarrow e.g. select 12mths

NOTE: Western Sydney HealthPathways Immunisation for vaccine schedule recommendations

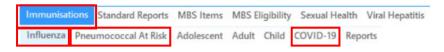


4. Recalculate



> In Report section

5. "Immunisations" tab → select Influenza or Pneumococcal At Risk or COVID 19



Select 'Not Recorded' → Export → XLS File → Save (e.g. Create a folder C:/ClinicalAudit/CAT Patient FollowUp)

- 6. Optional: Create a prompt to display in Topbar
- 7. Optional: Optional: Use the <u>Measuring Outcomes table</u> to track progress and support <u>self-reflection</u> over time..



An alternative way to flag RACH patients is by using the RACH address—sort the vaccination report by address in Excel to easily identify and group these patients. Need help? Contact support@wentwest.com.au.

1.5 Activity - Culturally & Linguistically Diverse patients

Activity goal QI lead & team members	The aim of this activity is identify patients with Culturally & Linguistically Diverse (CALD) patients eligible for vaccination.		
QI lead & team members	Who will need to be involved?		
Start date	Start date	End date	end date

CAT4 recipe:

Complete the below table by **logging** into Pen CS <u>CAT4</u> → Show Extracts → load latest data extract → Hide Extract

In Filter section

 'General' tab → Under 'Activity' → select 'Active (3x in 2yrs)'* → or 'Patient Status' tab → tick 'Registered with MyMedicare'



4. **Ethnicity** \rightarrow tick box for other ethnicities than Australian.



5. Date Range (results) \rightarrow e.g. select 12mths

NOTE: Western Sydney HealthPathways Immunisation for vaccine schedule recommendations

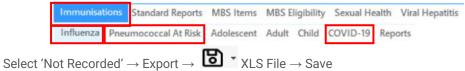


6. Recalculate



In **Report** section

7. "Immunisations" tab → select Influenza or Pneumococcal At Risk or COVID 19



(e.g. Create a folder C:/ClinicalAudit/CAT Patient FollowUp)

- 8. Optional: Create a prompt to display in Topbar
- 9. Optional: Optional: Use the Measuring Outcomes table to track progress and support self-reflection over time.

1.1 Activity - People with Chronic Conditions

	Activity goal		The aim of this activity is identify people chronic conditions e.g., asthma, diabetes, heart disease eligible for vaccination.		
(C)	QI lead & team members	Who will need to be involved?			
	Start date	Start date	End date	end date	

Refer to Practice Incentive Program Measures or filter by other conditions

- PIPQI Measure 5 Influenza immunisation for patients with diabetes
- PIPQI Measure 6 Influenza immunisation for patients with COPD

CAT4 Recipe:

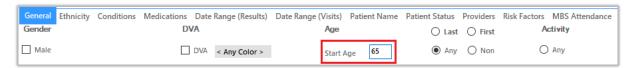
Complete the table below by logging into Pen CS **CAT4** \rightarrow Show Extracts \rightarrow load latest data extract \rightarrow Hide Extract

> In Filter section

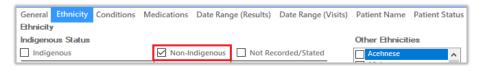
 Under 'General' tab → 'Activity' tab→ select 'Active (3x in 2yrs)' OR 'Patient Status' tab → tick 'Registered with MyMedicare'



2. Under 'General' tab → Age → Start Age "65"



- 3. (optional filtering):
 - > Under 'General' tab → 'Ethnicity' tab → Indigenous Status → select 'Non-Indigenous' under



4. Date Range (results) → e.g. select 12mths -

NOTE: Western Sydney HealthPathways Immunisation for vaccine schedule recommendations



5. Recalculate

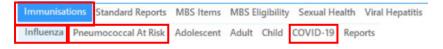


> In Report section

6. 'Disease' → 'Count' → select on "Diabetes Type II, Diabetes Type I, Undefined Diabetes, Asthma, COPD, CHD, Heart Failure, Hypertension, Stroke, Inflammatory Arthritis, Renal Impairment, Atrial Fibrillation" segments of the graph. Any combination of chronic conditions can be selected, this will show all patients with at least one of the selected conditions



7. "Immunisations" tab → select Influenza or Pneumococcal At Risk or COVID 19



Select 'Not Recorded' \rightarrow Export \rightarrow XLS File \rightarrow Save (e.g. Create a folder C:/ClinicalAudit/CAT Patient FollowUp)

- 10. Optional: Create a prompt to display in Topbar
- 11. Optional: Use the Measuring Outcomes table to track progress and support self-reflection over time.



Use the immunisation period as an opportunity to enrol patients with chronic conditions into MyMedicare

Module 1: Measuring Outcomes

Run a CAT4 search to establish a baseline measure and at each report date to track progress over time.

Active* people aged 65 years and over with	Baseline	Report 1	Report 2	Report 3
Active people aged 03 years and over with	date	date	date	date
Current Year - COVID-19 vaccination				
Current Year - Influenza vaccination				
Current Year - Pneumococcal vaccination				
Active* Indigenous patients with	Baseline	Report 1	Report 2	Report 3
	date	date	date	date
Current Year - COVID-19 vaccination				
Current Year - Influenza vaccination				
Current Year - Pneumococcal vaccination				
Active* patients with immunocompromised condition/s	Baseline	Report 1	Report 2	Report 3
Active patients man initialization promised contains.	date	date	date	date
Current Year - COVID-19 vaccination				
Current Year - Influenza vaccination				
Current Year - pneumococcal vaccination				
Active* RACH Residences with	Baseline	Report 1	Report 2	Report 3
7.64.76	date	date	date	date
Current Year - COVID-19 vaccination				
Current Year - Influenza vaccination				
Current Year - Pneumococcal vaccination				
Active* CALD notionto with	Baseline	Report 1	Report 2	Report 3
Active* CALD patients with	date	date	date	date
Current Year - COVID-19 vaccination				
Current Year - Influenza vaccination				
Current Year - Pneumococcal vaccination				
Active* Patient with Chronic Condition "Diabetes"	Baseline	Report 1	Report 2	Report 3
Active i duent with official collution blabetes	date	date	date	date
Current Year - COVID-19 vaccination				
Current Year - Influenza vaccination				
Current Year - Pneumococcal vaccination				

^{*} Per RACGP, an active patient has 3+ visits in 2 years. This filter may exclude new or at-risk patients who don't see their GP regularly

Measuring Outcome CPD Tip: Collaborate as a team to generate a <u>CAT4 list of patients per GP</u>.

Module 1: Group reflection after completing activities

As a team, analysis and review baseline data results and discuss change ideas and actions. Use PDSA cycles to test and measure change ideas				
The degree to which the learning needs were met:	To what degree this activity was relevant to your practice:			
☐ Not met	☐ Not met			
Partially met	Partially met			
Entirely met	Entirely met			
What did you learn? What changes would you make to your practise as a result?				
For example, based on your CAT4 database search was y	our practice's results:			
higher than you expected				
about what you expected				
☐ lower than you expected				
RACGP CPD: utilise the self-reporting feature on Quick Log mycpd.racgp.org.au to document reflection.				

Module 2

Australian Immunisation Register (AIR

On completion of this module, you will:

- View & update AIR immunisation history (marked as "not given here" if recorded externally).
- · Update patient details: additional vaccines, Indigenous status, schedule catch-ups.

<u>The Australian Immunisation Register (AIR)</u> is an online national register which records vaccines given to all people in Australia. This includes vaccines that are under the National Immunisation Program (NIP), COVID-19 vaccines, and vaccines that are given privately.

The AIR can only accept immunisation information from recognised vaccination providers in Australia, such as GPs, midwives and nurse practitioners. The AIR cannot accept any information from parents, guardians or individuals.

Recognised vaccination providers can use the AIR to:

- record patient immunisation information
- update or correct data already sent to the AIR
- request reports to help identify any patients due or overdue for a vaccination
- <u>report immunisation medical exemptions</u> online (if eligible)
- get information payments for the provision of certain vaccinations (if eligible)
- · find out a patient's immunisation status, regardless of who immunised them
- print an <u>immunisation history statement</u> to prove a patient's immunisation status for child care, school, employment or travel purposes.

Learn how to use AIR via **<u>Department of Human Services AIR</u> <u>eLearning modules</u>**





The clinical team can use AIR to check a patient's immunisation status before initiating recalls.

Generate a patient list with contact details, update records in the GP Clinical Desktop System (CDS), call patients for updates, or create a mail merge for recalls/reminder.

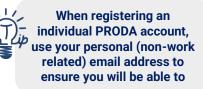
The Practice Nurse can then action the recall list to ensure vaccines are administered.

2.1 Activity - Accessing the AIR as delegate via PRODA /HPOS



To access the AIR as a delegate of a recognised vaccination provider** (such as a GP, midwife or nurse practitioner) you need to <u>register an individual PRODA</u> <u>account and Registration Authority (RA) number.</u>

After you have set up your individual PRODA account, use the following instructions to link AIR into <u>PRODA/HPOS</u> and submit a delegation request in HPOS (for provider to approve). For more information, access NCIRS guide for supporting and understanding delegations in HPOS to enable access to AIR



How to access the AIR as a delegate

After your delegation request has been approved by the provider, follow the steps below to access the AIR:

- 1. Log on to your **PRODA** individual account
- 2. Under My Linked Services the HPOS tile will display
- 3. Click on **Go to Service** on the tile to access HPOS
- 4. Click on No Organisation Proceed as an individual only, then Continue
- 5. From the **My providers** table, select in the action column for the relevant provider
- 6. Select My programs
- 7. Click on the Australian Immunisation Register (AIR)



My programs





Please choose an organisation to act on behalf of:

O No Organisation - Proceed as an individual only

Organisation

O PRODA Organisation

Important note:

Health Professional Online Services (HPOS)

To enable access to the AIR functions, make sure to select **My programs** when requesting your delegation functions.

Identifying patient details

- 1. To search for your patient, on the left-hand menu, select 'Identify Individual'.
 - If the **patient is eligible for Medicare**, you can find the patient's AIR record by entering their Medicare number or Individual Reference Number (IRN).
 - If the patient is not eligible for Medicare, look them up by entering their surname, first name and date of birth.
- 2. If the AIR finds a unique match, the 'Individual details' page will display their immunisation details.

**Finding Your AIR Provider Number

- If your practice administered COVID-19 vaccines, you may already have an AIR provider number.
- To check: Log into PRODA → Medicare → Organisation → HPOS AIR Provider Number.
- If missing, submit <u>IM004 application</u> to your state/territory health department. If unsure contact the AIR on 1800 653 809.

2.2 Activity – Accessing the AIR via Practice Management Software

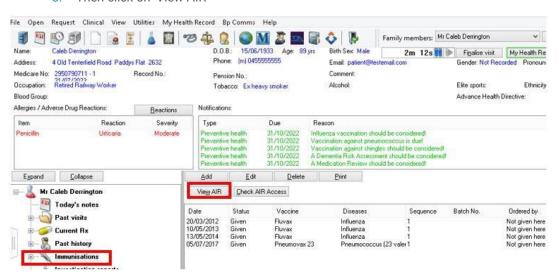




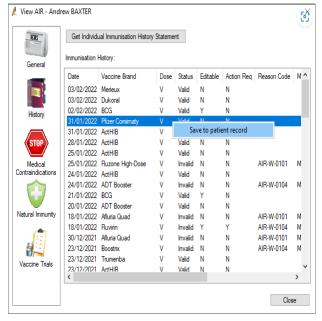
Ensure all users have the appropriate AIR Provider Number and verify existing numbers using provided instructions in <u>Activity 2.1</u> to maintain smooth data submission and access.

Access to AIR via Best Practice

- 1. Search for the patient's record: Press F2 on the home screen and enter the patient's details
- 2. On the left-hand side of the page, click on the Immunisation tab
- 3. Then click on 'View AIR'



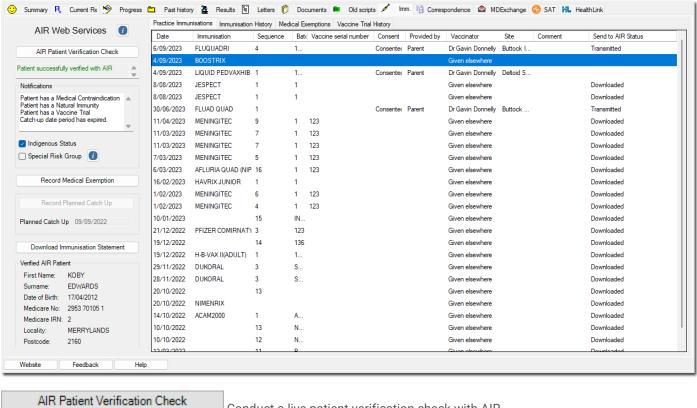
4. The report will then appear with the patient's immunisation history



For more information, visit <u>Best Practice Knowledge Base</u> to learn how to access and update AIR patient profiles including downloading records, viewing alerts, and updating vaccines, Indigenous status, and catch-ups.

Access to AIR via Medical Director

- 1. Search for the patient's record
- 2. Click on the 'Imm' tab
- 3. Then select 'Immunisation History'
- 4. The patient's immunisation history will show at the bottom of the screen



AIR Patient Verification Check

Conduct a live patient verification check with AIR.

Record Medical Exemption

Click to record a medical exemption for the given patient.

Record Planned Catch Up

Click to record a planned catch up for the given patient.

Download Immunisation Statement

Click to download the patient's immunisation statement from AIR.

For more information, visit <u>Medical Director Knowledge Base</u> to learn how to access and update AIR patient profiles including downloading records, viewing alerts, and updating vaccines, Indigenous status, and catch-ups.

2.3 Activity - AIR reports

(Use AIR reports to identify patients due or overdue for immunisations, track immunisation history, organise patients by age group, and detect incorrectly recorded information.		
	QI lead & team members	Who will need to be involved?		
	Start date	Start date	End date	end date

The Australian Immunisation Register (AIR) offers <u>several reports</u> to help your practice identify patients who are due or overdue for immunisations, as well as to support broader patient data management needs. These reports provide valuable insights, including:

- Individuals' immunisation history and upcoming or overdue vaccine dates
- Lists of patients by age group
- Identification of incorrectly recorded information

Reports can be downloaded and saved for offline use, with output formats that can be customised to suit your practice's needs. You can also schedule reports to run regularly (e.g., weekly) and enable email notifications to alert you when your reports are ready to access on the AIR site.

Resources Available

Services Australia has a suit of infographics on the <u>Health Professional Education portal</u> to support health professionals in using AIR. These resources provide guidance on how to:

- delete a vaccination from the AIR
- access and use AIR reports
- check the accuracy of immunisation encounters before reporting to the AIR

Getting Started

Decide which report best meets your needs. For winter preparedness, we recommend the following:

- AIR042A COVID-19 and Influenza Immunisation Report
- AIR010A Immunisation History Report

Once requested, your AIR report will be available for download the **View** tab under the **Reports** menu in AIR.

Additional Information

- Services Australia AIR010A User Guide
- AIR eLearning Module



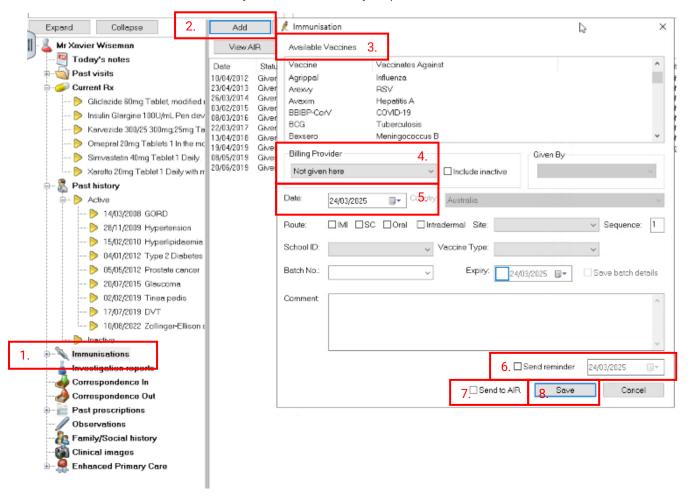
2.4 Activity - Updating Patient Record



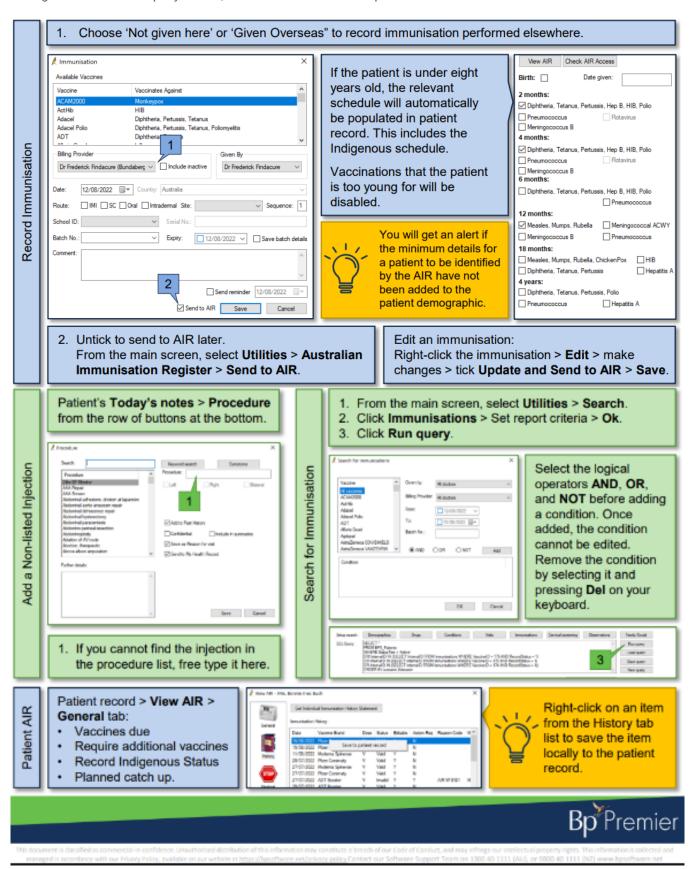
Visit <u>Services Australia for a comprehensive guide</u> on recording and updating an encounter in the Australian Immunisation Register (AIR). If the immunisation was not administered at your practice it is still important that it is entered into the clinical software to ensure an accurate health summary.

Best Practice: Updating Patient's Immunisation Record

- 1. In Immunisation section
- 2. Select 'Add'
- 3. Choose the correct vaccine from the list provided
- 4. Under 'Billing Provider', select 'Not given here' from the drop-down list
- 5. Enter the date that appears on the report from the AIR
- 6. Set when to 'Send Reminder'
- 7. DO NOT select the 'Send to AIR' box
- 8. Select 'Save'
- 9. You will now be able to identify which vaccinations your patient has not received.



Best Practice: <u>immunisation infographic</u> summarising process for: recording immunisations, adding a non-listed injection, running an immunisation guery search, and how to view and save patient AIR records into Best Practice.

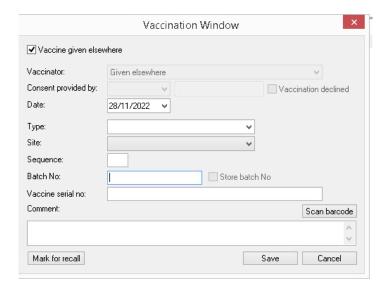


Medical Director: Updating Patient's Immunisation Record

1. On the main screen of the patients file, click on 'Imm'



- 2. To add an immunisation, click on the
- 3. If you have identified that the vaccination was provided elsewhere, click on the box 'Vaccine given elsewhere'
- 4. Complete the details from AIR in the 'Vaccination Window', then select 'Save'





Check individual My Health Record or request AIR report or your practice patients immunisation status.

Module 2: Group reflection after completing activities:

As a team, analysis and review baseline data results and discuss change ideas and actions. Use PDSA cycles to test and measure change ideas				
The degree to which the learning needs were met:	To what degree this activity was relevant to your practice:			
□ Not met	□ Not met			
☐ Partially met ☐ Entirely met	Partially met Entirely met			
What did you learn? What changes would you make to your practise as a result?				
For example, based on your CAT4 database search was y	our practice's results:			
higher than you expected				
about what you expected				
☐ lower than you expected				
RACGP CPD: utilise the self-reporting feature on Quick Log mycpd.racgp.org.au to document reflection.				

Module 3

Patient Engagement

On completion of this module, you will:

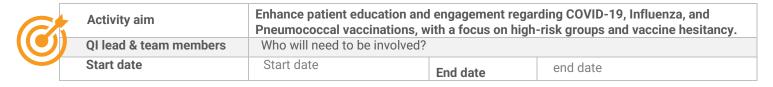
- Improve Patient Engagement: Enhance communication strategies to boost patient participation in vaccination programs.
- Optimise Recalls and Reminders: Develop effective systems for timely vaccination reminders.
- Create Effective Patient Resources: Design resources that educate and encourage vaccination.







3.1 Activity - Patient Engagement



Patient Resources

COVID-19

Western Sydney's diverse community, with many residents born overseas and a significant First Nations population, faces higher risks from vaccine-preventable diseases. Providing translated and culturally appropriate resources is essential to support COVID-19, flu, and pneumococcal vaccination and keep our community protected.

Influenza Vaccination

Flu vaccination Community Resources

Flu vaccination - Consumer fact sheet

Below are key Australian and NSW resources for patient education tailored to different population groups:

 COVID vaccination Booster Dose Poster COVID vaccination easy read resources COVID vaccination Translated Resources COVID vaccination First Nations Resources COVID vaccination AUSLAN Videos 	 Flu vaccination Translated Resources Flu vaccination First Nations Resources Order Flu vaccination Resources (Print)
Pneumococcal	All Vaccines
 Pneumococcal Community Resources Pneumococcal First Nations Resources 	 WentWest Winter Preparedness Poster Commonwealth Immunisation Resources NSW Health Immunisation Resources NSW Health Order Printed resources Indigenous HealthInfoNet Immunisation

Practical Steps to Prepare Your Practice

COVID vaccination Information

COVID vaccination Community Resources

- Send communications to all patients from March–April onwards, highlighting the importance of COVID-19, Influenza, and Pneumococcal vaccinations.
- Send targeted SMS reminders to high-risk patients about vaccination arrangements and follow up with those who
 have not yet attended.
- Display multilingual posters and digital materials in waiting areas and consultation rooms to promote vaccine awareness.
- Provide credible, easy-to-understand resources that debunk common myths and support informed decisionmaking
- Host vaccine Q&A sessions or group education forums with clinicians to address patient concerns, increase
 engagement, and encourage open dialogue.
- Encourage trusted voices, such as GPs and community leaders, to advocate for vaccination and build confidence.
- Offer personalised, culturally sensitive conversations with hesitant patients to address individual concerns and health beliefs.

3.2 Activity - Reminders and Patient Education

	Activity aim	Develop and apply systems for patient recalls and reminders to enhance follow-up care and continuity in COVID-19, Influenza, and Pneumococcal vaccination management.		
QI lead & team who will need to be involved? members				
	Start date	Start date	End date	end date

RACGP standards require preventive care and tailored reminders, including for patients with limited English. Use your software to identify and remind patients due for vaccines.

Software	Adding reminders	Create mail merges	Create bulk SM	Adding notes
Best Practice	Add a Clinical Reminder to a patient	Send Health Awareness Communications	Send clinical reminders	Add and review contact notes
Medical Director	Recall, Reminders, Actions and Outstanding Requests	Mail merge	Sending SMS reminders	Editing a patient's details from within their record

Training: Free online modules at Train IT, Code: WSPHN-2023

GoShare

patient education platform

Access

GoShare is a patient education platform enabling health professionals to send tailored, trusted resources—such as videos and fact sheets—via email or SMS to help patients manage their health, improve health literacy, and hoost engagement.

FREE GoShare Recall Campaigns

- Pneumococcal Read <u>Practice Brief</u> and complete <u>expression of interest</u> form
- > COVID Read Practice Brief and complete expression of interest form

WentWest has funded GoShare subscriptions for all general practices in Western Sydney.

For access, please contact us at support@wentwest.com.au



SMS Message Tips: Keep it clear, professional, and actionable.

Example: Hello [Patient Name], you're due for your [vaccine] at [Practice Name]. Book online or call [Phone #]

Module 3: Group reflection after completing activities:

As a team, analysis and review baseline data results and discuss change ideas and actions. Use PDSA cycles to test and measure change ideas				
The degree to which the learning needs were met:	To what degree this activity was relevant to your practice:			
☐ Not met	☐ Not met			
Partially met	Partially met			
Entirely met	Entirely met			
What did you learn? What changes would you make to your practise as a result?				
For example,				
 Has patient engagement increased through education efforts? Which educational strategies were most effective? Have vaccination rates improved following outreach efforts? Do relevant team members know how to send out GoShare patient resources, videos and apps? What barriers were encountered in patient engagement? 				
RACGP CPD: utilise the self-reporting feature on Quick Log mycpd.racgp.org.au to document reflection.				

Appendices

Model for Improvement

Step 1: Thinking Part - Three Fundamental Questions (complete the Model for Improvement (MFI) as a whole team)

1. GOAL What are we trying to accomplish?

By answering this question, you will develop your GOAL for improvement. It important to establish a S.M.A.R.T (Specific, Measurable, Achievable, Relevant, Time bound) goal and people-crafted aim that clearly states what you are trying to achieve.

Increase <pneumococcal> vaccination recall for <00>patients adults aged <70–80> in the next 3 month (winter period)

2. MEASURE How will we know that a change is an improvement?

By answering this question, you will develop the MEASURE(S) you will use to track your overarching goal. Record and track your baseline measurement to allow for later comparison.

- Number of overdue patients
- Number of administered vaccines
- Number of eligible patient cohort

Baseline: <34> overdue patients

Baseline date: 19/03/2025

3. IDEAS What changes can we make that will result in improvement?

By answering this question, you will develop IDEAS for change. Tip: Engage the whole team in formulating change ideas. Include any predictions and measure their effect quickly.

Idea 1	Using data extracted from the Australian Immunisation Register (AIR), a report will be generated listing patients overdue for the <prevenar13> vaccine. These patients will be contacted and offered the vaccine.</prevenar13>
Idea 2	Use GoShare <or recall="" system=""> recall patients aged <70 to 80> who have not yet received their <pneumococcal> vaccination and monitor vaccination rate through a 30 days and 60 days progress report.</pneumococcal></or>
Idea 3	
Idea 4	
Idea 5	

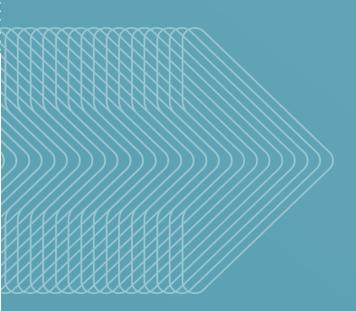
Next step: Each idea may involve multiple short and small PDSA cycles.

PDSA (Plan-Do-Study-Act)

Step 2: Doing Part - Plan-Do-Study-Act (Once you have completed the Model for Improvement (MFI), use this template to document and track your PDSA cycles)

Idea	Plan		Do	Study	Act
#	Plan the test	Prediction	Do the test on small scale	Analyse the results	Make a plan for next step
	How will we run this test? Who will do it and when? What will we measure?	Prediction or hypothesis on what will happen.	Was the plan completed? Yes or No. Collect data. Consider what worked well and why? Document any unexpected observations, events or problems.	Analyse results, compare them to predictions, and reflect on what you learned	Based on your learnings from the test, what will you do next (e.g., adopt, adapt or abandon)? How does this inform the plan for your next PDSA?
1.1	Use GoShare <or recall="" system=""> recall patients aged <70 to 80> who have not yet received their <pneumococcal> vaccination and monitor vaccination rate through a 30 day progress report.</pneumococcal></or>	Will need repeat recall for remaining patients who have not been vaccinated within this timeframe	PM competed	A total of 11 patients were administered Prevenar 13 at 30 days	Customise GoShare recall message to increase to vaccination and monitor progress for the next 30 days.
1.2	Use GoShare <or recall="" system=""> recall patients aged <70 to 80> who have not yet received their <pneumococcal> vaccination and monitor vaccination rate through a 60 day progress report.</pneumococcal></or>			A total of 21 patients were administered Prevenar 13 at 60 days • 2 patients declined vaccines (recorded in patient notes) • 6 patients are considering vaccination (will follow up in 1-2 weeks) • 4 patients uncontactable (multiple attempts to contact) • 1 patient already received Prevenar 13 (data uploaded to AIR) • 21 patients vaccinated	Of the 34 patients overdue for pneumococcal vaccines, 21 patients were vaccinated, and 1 patient had already received vaccine.









Darug Land, 1A/160 Hawkesbury Road Westmead NSW 2145

PO Box 50, Westmead NSW 2145

T (02) 8811 7100 **F** (02) 9622 3448

E wentwest@wentwest.com.au

www.wentwest.com.au

ACN 099 255 103 ABN 80 099 255 106

WentWest the Western Sydney Primary Health Network