

Population Health Public Health Unit 2017/18 Business Plan

Leading care, healthier communities



Health

South Western Sydney
Local Health District

Population Health Approach

Population Health in South Western Sydney Local Health District (SWSLHD) aims to protect and promote the health of the local population, reduce inequalities in health, and achieve optimal health and wellbeing for all people living in South Western Sydney. Our services work with many partners to deliver a comprehensive range of high quality, evidence-based population health services to the residents of SWSLHD. Some of our services aim to help individuals and families adopt healthy behaviours and avoid illness, and some of our services aim to create more health promoting physical and social environments.

Values

The values on which Population Health services are based are:

Equity: Promote equity by providing and advocating for accessible, fair and culturally appropriate services.

Professionalism: Reflect a professional attitude and provide services with efficiency, impartiality and integrity.

Partnerships: Work in partnership with the community to ensure that there is true involvement, at the earliest opportunity, in the planning, delivery and evaluation of population health services.

Evidence: Activities will be supported by sound evidence and will contribute to the evidence base.

Environmental sustainability: Activities that promote environmental sustainability.

Quality improvement: Strive for continuous quality improvement.

Public Health Unit

The Public Health Unit is a unit of Population Health. The Public Health Unit Business Plan 2017/18 has been developed to guide service development and improvement within the Unit over the coming year. It takes into account key priorities and initiatives in the SWSLHD Strategic and Healthcare Services Plan, the SWSLHD Corporate Plan and Population Health Operational Plan which have relevance to the activities of the Public Health Unit. This includes where relevant performance targets set by the NSW Ministry of Health.

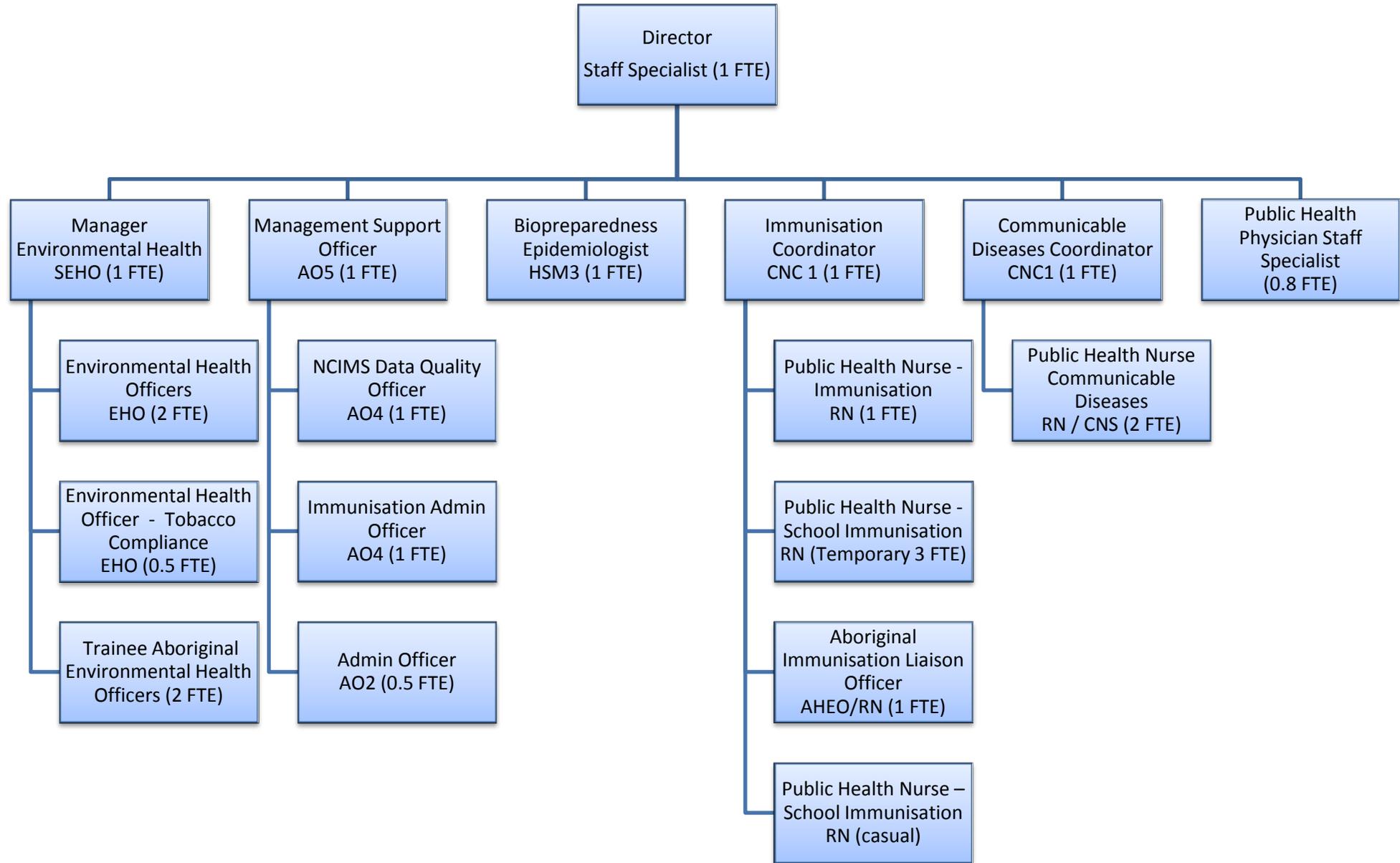
The Public Health Unit is committed to achieving the SWSLHD Vision of **leading care, healthier communities**. Staff in the department uphold the core values of **Collaboration, Openness, Respect** and **Empowerment**.

Role of the Public Health Unit

The purpose of the Public Health Unit is to protect the health of the community through control of communicable diseases and some environmental health risks. The main activities of the Public Health Unit are surveillance, monitoring and responding to notifications of communicable diseases; controlling outbreaks; implementing the adolescent (high school) immunisation program; providing immunisation advice; assessing environmental health risks; control of some environmental health hazards; ensuring compliance with tobacco control legislation; and responding to public health emergencies.

The Public Health Unit is located at Level 2, 157-161 George St, Liverpool NSW 2170.

Organisational Structure



Annual Budget

The Public Health Unit has an annual operating budget of \$2.49 million and FTE of 20.8 (excluding casual staff and staff on placement).

Achievements

- **One Health Q fever workshop:** The Public Health Unit organised a One Health Q fever *'Strengthening One Health Collaboration in the Control and Management of Q fever'* workshop held on 31 March 2017 at the Liverpool Catholic Club. The workshop included a wide variety of presentations from Health Protection NSW, ICPMR, Seqirus, Ausvet Pty Ltd, SafeWork NSW, veterinarians, NSW Farmer's Association and Q fever researchers.
- **Bankstown dental investigation:** In July 2016 the Public Health Unit was notified by the Dental Council of serious breaches of infection control procedures by a dentist in Bankstown. A public health investigation resulted in patient notification being undertaken in October 2016.
- **Bankstown Hospital cold chain breach:** The Public Health Unit was involved in the response to two vaccine cold chain breach incidents that occurred in Bankstown Hospital birthing unit and maternity wards in December 2016 and January 2017.
- **NSW Scout Cuboree syndromic surveillance and environmental health monitoring:** The 2017 NSW Scout Cuboree was held at Cataract Scout Park in January 2017 with approximately 3,400 participants. A syndromic surveillance and environmental health monitoring tool was implemented which resulted in the prompt identification and control of a gastroenteritis outbreak.
- **Exercise 'Caledonia Storm':** A quasi-desktop emergency exercise was organised by the Public Health Unit during July 2016 in collaboration with Community Health and with the assistance of the District Disaster Managers. The exercise aimed to test the response to an infectious disease outbreak emergency and pandemic preparedness.
- **Aboriginal immunisation:** Immunisation coverage among Aboriginal children in South Western Sydney remains above the target of 92% coverage. Immunisation coverage in the Jan – March 2017 quarter was higher among Aboriginal children compared with non-Aboriginal children in SWSLHD at one, two and four years of age.
- **Responding to increased workload associated with 'No Jab No Pay':** The immunisation team successfully managed a large increase in workload associated with the introduction of the Commonwealth 'No Jab No Pay' policy. The policy resulted in a large increase in calls from parents, requests for immunisation statements, and providing catch up advice to health care professionals for children overdue for immunisations.
- **Swimming Pool and Splash Park forums:** The Public Health Unit organised and ran two swimming pool, spa and splash park forums for council officers and pool staff in 2016.

Challenges

- To ensure sound systems are in place to respond safely and effectively at all times to public health incidents.
- To improve staff knowledge and competence, and create a culture that encourages learning and improvement.

- To respond to emerging issues, especially those that are most important to South Western Sydney.
- To ensure input into major development proposals in the rapidly expanding South Western Sydney region to highlight key public health issues at the planning stages.
- To develop strategies to improve immunisation coverage and reduce communicable disease outbreaks including measles among new migrants to the South Western Sydney region.

Implementation and Reporting

The action table following identifies the main strategies that the Public Health Unit will undertake in the 2017/18 financial year, the actions to be taken, how success will be measured, the timeframe for completion and staff responsible. Each initiative is linked to one of the eight SWSLHD Corporate Directions reflected in the Population Health Operational Plan.

The Public Health Unit will use this Business Plan to guide service improvement. Progress will be regularly reviewed by the Director in collaboration with staff. The Director will regularly report to the Population Health Executive on progress.

Quality improvement

As outlined in the Population Health Quality Improvement Framework, quality activities are to be integrated into the business plans. Strategies and actions considered to be significant quality improvement activities are tagged as 'QIP' in the strategies column. These identified projects are also included in the Quality Improvement Project Plan.

Signed:

Kate Alexander
A/Director, Public Health Unit

Signed:

Stephen Conaty
Director, Population Health

Business Plan: Administration

| Task No. | Strategy | Actions (how) | Key Performance Indicator | Responsibility with | Timeframe for completion | Links To SWSLHD or Facility Plan |
|----------|---|--|---|---------------------|--------------------------|---|
| 1. | Improve monitoring of financial budget information | <ul style="list-style-type: none"> Print financial statements monthly to discuss at senior manager's meeting. | <ul style="list-style-type: none"> Monthly financial statement review at SM meeting | Rose Avery | Ongoing | Population Health Operational Plan 8.1.1; 8.1.2 |
| 2. | Provide logistics support for PHU emergency management preparedness | <ul style="list-style-type: none"> Support and review the emergency management kits for the EH team and Controller kit in the event of an outbreak. | <ul style="list-style-type: none"> Six monthly audit | Rose Avery | Ongoing | Population Health Operational Plan 1.3.3 |
| 3. | Transition to the new health roster system | <ul style="list-style-type: none"> Admin team to attend training to effectively use the new health roster system. Implementation of the new health roster system in the PHU. | <ul style="list-style-type: none"> Training attended Implementation of the new health roster system | Rose Avery | July 2017 Aug 2017 | Population Health Operational Plan 8.1.1; 8.1.2 |

Business Plan: Emergency Management and Epidemiology

| Task No. | Strategy | Actions (how) | Key Performance Indicator | Responsibility with | Timeframe for completion | Links To SWSLHD or Facility Plan |
|----------|--|---|---|--|--------------------------|---|
| 4. | Business continuity plans are in place | <ul style="list-style-type: none"> ▪ Develop a business continuity plan to ensure the PHU has the ability to continue its core business in the event the permanent office cannot be accessed. | <ul style="list-style-type: none"> ▪ Business continuity plan developed | Khoi Dang Do / Stephanie Fletcher-Lartey | Feb 2018 | Population Health Operational Plan 1.3.3; 1.3.7 |
| 5. | Emergency exercise to test the PHU's preparedness and response capacity | <ul style="list-style-type: none"> ▪ Participation in at least one emergency exercise by July 2018. | <ul style="list-style-type: none"> ▪ PHU staff participate in at least one emergency exercise | Khoi Dang Do / Stephanie Fletcher-Lartey | July 2018 | Population Health Operational Plan 1.3.3; 1.3.7 |
| 6. | Develop capacity to monitor and evaluate public health interventions, conduct operational research in an ethically acceptable way, and prepare manuscripts for publication in peer-reviewed journals | <ul style="list-style-type: none"> ▪ Work with staff to select and utilise appropriate research and evaluation methodologies to design quality improvement projects. ▪ Oversee data collection, analysis and interpretation of research, monitoring and evaluation data. ▪ Oversee the preparation of manuscripts for publication in peer-reviewed journals. | <ul style="list-style-type: none"> ▪ At least three quality improvement projects developed and conducted in keeping with ethical standards ▪ At least one peer reviewed publication arising from each quality improvement project | Khoi Dang Do / Stephanie Fletcher-Lartey | June 2018 | Population Health Operational Plan 3.4.8; 5.1.1 |
| 7. | Targeted surveillance reports for stakeholders | <ul style="list-style-type: none"> ▪ Prepare surveillance reports on specific conditions as requested / as necessary including: <ul style="list-style-type: none"> ○ Sexually transmitted infections ○ Blood borne viruses ○ Influenza | <ul style="list-style-type: none"> ▪ Surveillance reports circulated to relevant stakeholders at frequency to be determined: <ul style="list-style-type: none"> ○ STIs: as required / annually ○ Blood borne viruses – as needed / annually ○ Influenza: reports distributed during flu season to key stakeholders across district-wide services | Khoi Dang Do / Stephanie Fletcher-Lartey | June 2018 | Population Health Operational Plan 3.2.5 |

Business Plan: Environmental Health

| Task No. | Strategy | Actions (how) | Key Performance Indicator | Responsibility with | Timeframe for completion | Links To SWSLHD or Facility Plan |
|----------|--|--|--|---|--------------------------|--|
| 8. | Undertake a feasibility assessment for a Housing for Health project in SWS for Tharawal Aboriginal communities with a view of this project being part of the 2018/19 Business Plan | <ul style="list-style-type: none"> • Liaise with CEO of Tharawal Local Aboriginal Land Council (LALC) • Liaise with Aboriginal Environmental Health Unit (AEHU) • Assess community need • Scope project(s) with Executive of LALC, SWSLHD Aboriginal Health Unit and AEHU | <ul style="list-style-type: none"> • Meetings held • Prepare progress report(s) with recommendations • Scoping of needs for project | John Birkett / Sally-Anne Donahue / Adam Slade / Kate Alexander | June 2018 | Population Health Operational Plan 1.5.18, 2.3.5, 3.4.1, 3.4.2 |
| 9. | Renew/agree partnership plan with local councils annually | <ul style="list-style-type: none"> • Partnership plans distributed to councils | <ul style="list-style-type: none"> • 100% agreement with council officers | John Birkett | June 2018 | Population Health Operational Plan 2.1.4 |
| 10. | Maximise compliance of Private Water Suppliers with Public Health Act provisions | <ul style="list-style-type: none"> • Review current list and liaise with non-compliant private water suppliers • Extend list to include premises which are holiday rentals • Ensure premises that require a water quality assurance plan (QAP) submit a QAP • Review QAPs and provide advice | <ul style="list-style-type: none"> • Contact identified premises that haven't been checked and assess need to comply with Act | John Birkett / Sally-Anne Donahue / Adam Slade | June 2018 | Population Health Operational Plan Action 2.1 |
| 11. | Wingecarribee Drinking Water Management System | <ul style="list-style-type: none"> • Improve compliance with drinking water guidelines • Improve response to actionable items | <ul style="list-style-type: none"> • Completion of support documents • Review critical control points in risk assessment tables | John Birkett / Peter Cavagnino | June 2018 | Population Health Operational Plan 2.1 |

Business Plan: Environmental Health (continued)

| Task No. | Strategy | Actions (how) | Key Performance Indicator | Responsibility with | Timeframe for completion | Links To SWSLHD or Facility Plan |
|----------|---|--|--|--|--------------------------|---|
| 12. | Improve knowledge and skills of council swimming pool management, pool staff and EHOs in pool maintenance, practice and regulation (QIP) | <ul style="list-style-type: none"> • Hold a forum for Council Pool Managers, pool staff and EHOs to discuss public health issues relevant to running public swimming pools (e.g. cryptosporidium notifications and response to manage, pool chemical standards, smoke-free environment issues concerning pools, new testing equipment) • With the emerging popularity of water splash parks and water play features, to advise council officers and staff about the requirements • Invite guest speakers to present | <ul style="list-style-type: none"> • Attendance at forum • Compliance with pool standards in Public Health Act • Reduction in number of cryptosporidium notifications associated with public swimming pools | Peter Cavagnino / John Birkett / Scott Rorke | October 2017 | Population Health Operational Plan 2.1.4, 3.1.2 |
| 13. | Improve knowledge and compliance with the Smoke-free Environment Act requirements for commercial outdoor dining | <ul style="list-style-type: none"> • Provide information and education to café/food businesses with outdoor dining • Provide information and education to council staff who approve cafes/food businesses with outdoor dining • Attend Ministry of Health tobacco training and teleconferences • Further develop risk assessment procedures • Conduct enforcement activities | <ul style="list-style-type: none"> • Meetings held with council staff • Education provided to café/food businesses • Attend Ministry training • Conduct surveys • Number of penalty infringement notices issued | Jeremy Tafau / Scott Rorke | June 2018 | Population Health Operational Plan 1.5.6 |

Business Plan: Environmental Health (continued)

| Task No. | Strategy | Actions (how) | Key Performance Indicator | Responsibility with | Timeframe for completion | Links To SWSLHD or Facility Plan |
|----------|--|---|---|--|--------------------------|---|
| 14. | Improve knowledge and skills of council officers in the new requirements for Legionella control (QIP) | <ul style="list-style-type: none"> • Hold forums for council EHOs to inform of the new legislation, training and testing requirements being introduced for legionella control • Advice on the new requirements including risk management plans for all registered cooling towers, auditing of each system annually by an accredited auditor • Attend Ministry of Health training and teleconferences • Participate in forums to inform building owners/managers and the industry about new requirements • Further develop resources for councils | <ul style="list-style-type: none"> • Forum held with council EHOs • Attendance at industry forums • Compliance with the new requirements | Peter Cavagnino / John Birkett / Scott Rorke | June 2018 | Population Health Operational Plan 2.1.4, 3.1.2 |

Business Plan: Immunisation

| Task No. | Strategy | Actions (how) | Key Performance Indicator | Responsibility with | Timeframe for completion | Links To SWSLHD or Facility Plan |
|----------|--|--|--|--|--------------------------|--|
| 15. | Improve the quality of the adolescent (school) immunisation program (QIP) | <ul style="list-style-type: none"> ▪ Remote scanning embedded into the school program. Will ensure timely quality assurance, improved consent form completion and record keeping. ▪ Continue staff development – annual performance appraisals for all staff including casual. ▪ Conduct an annual independent audit of the school program. ▪ Evaluate the implementation of the NSW Health funded meningococcal ACWY vaccination for Years 11 and 12 in the school program starting Term 2 2017. ▪ Explore recruiting an immunisation data surveillance officer. | <ul style="list-style-type: none"> ▪ 100% of school records scanned and accuracy checked ▪ Exception reports reviewed ▪ 100% of performance appraisals completed ▪ Annual independent audit conducted ▪ 75% coverage for Men ACWY vaccination Years 11 and 12 in school program | Janice Kitson / Janette Suffield / Seng Kee Teo | Ongoing | Population Health Operational Plan 1.3.2, 1.5.10 |
| 16. | Work in partnership with the Primary Health Network (PHN) | <ul style="list-style-type: none"> ▪ Participation on the joint Immunisation Working Party with the SWS PHN. ▪ Provide CPD education to GPs through the PHN. | <ul style="list-style-type: none"> ▪ Attendance at bi-monthly meetings ▪ Number of CPD education sessions delivered | Janice Kitson | Ongoing | Population Health Operational Plan 1.5.12 |

Business Plan: Immunisation (continued)

| Task No. | Strategy | Actions (how) | Key Performance Indicator | Responsibility with | Timeframe for completion | Links To SWSLHD or Facility Plan |
|----------|--|--|---|---|--------------------------|---|
| 17. | Improve Aboriginal immunisation coverage | <ul style="list-style-type: none"> Follow up parents with SMS for upcoming / overdue immunisations and a reminder at 4 weeks that immunisation is due, including attaching details of the NSW Health 'Save the Date' app | <ul style="list-style-type: none"> Immunisation coverage for Aboriginal 1, 2 and 4 year olds \geq 92% coverage | Janice Kitson Trisha Collins | Ongoing | Population Health Operational Plan 1.5.11 |
| 18. | Improve the system for neonatal hepatitis B data collection (QIP) | <ul style="list-style-type: none"> Obtain and review a snapshot of SWSLHD neonatal hepatitis B data to identify data issues. Liaise with key stakeholders across SWSLHD and Sydney South West Private Hospital to inform the development of an improved system for neonatal hepatitis B data collection to meet the requirements of the updated 'NSW Health Neonatal Hepatitis B Prevention and Vaccination Program' policy. Develop and implement a new neonatal Hepatitis B data collection system. | <ul style="list-style-type: none"> Neonatal hepatitis B data snapshot reviewed and data issues identified Meeting held with key stakeholders across SWSLHD and Sydney South West Private Hospital New system developed for monthly neonatal hepatitis B data collection New system implemented for monthly neonatal hepatitis B data reporting from facilities to PHU Quarterly reports submitted by PHU to Immunisation Branch, Health Protection by the due date | Janice Kitson / Kate Alexander / Khoi Dang Do | June 2018 | Population Health Operational Plan 1.3, 3.2.5 |

Business Plan: Communicable Diseases

| Task No. | Strategy | Actions (how) | Key Performance Indicator | Responsibility with | Timeframe for completion | Links To SWSLHD or Facility Plan |
|----------|---|---|--|---------------------------|--------------------------|--|
| 19. | Continuous improvement of Aged Care Facility (ACF) influenza outbreak preparedness and management, including improved compliance with ACFs notifying the PHU of influenza outbreaks. (QIP) | <ul style="list-style-type: none"> Engage with aged care facilities by holding an influenza workshop or teleconference/s in March to April 2018 in preparation for the 2018 influenza season. Review all lab based influenza notifications and follow up those originating from aged care facilities. | <ul style="list-style-type: none"> Agenda developed for workshop / teleconference Workshop / teleconference held Evaluation of workshop / teleconference conducted All influenza notifications received from labs originating from ACFs investigated | Leng Boonwaat and CD team | June 2018 | Population Health Operational Plan 2.1 and 3.2.5 |

Business Plan: Communicable Diseases (continued)

| Task No. | Strategy | Actions (how) | Key Performance Indicator | Responsibility with | Timeframe for completion | Links To SWSLHD or Facility Plan |
|----------|--|---|--|------------------------------------|--------------------------|---|
| 20. | Improve the timeliness of Legionnaires' disease cluster identification | <ul style="list-style-type: none"> • Conduct enhanced surveillance of Legionnaires' disease notifications by maintaining a spreadsheet containing essential details of each case. • Regular review of Legionnaires' disease cases at weekly surveillance meetings. • Legionella cluster emergency meetings held where clusters are identified. | <ul style="list-style-type: none"> • All essential fields on Legionella spreadsheet completed for each notified case • Legionella cluster identification emergency management processes initiated when clusters are identified (i.e. meeting held with stakeholders, investigations initiated) | CD team / Epidemiologist / EH team | Ongoing | Population Health Operational Plan 1.3, 1.5 |

Business Plan: Communicable Diseases (continued)

| Task No. | Strategy | Actions (how) | Key Performance Indicator | Responsibility with | Timeframe for completion | Links To SWSLHD or Facility Plan |
|----------|--|---|---|---------------------------|--------------------------|--|
| 21. | Improve the management of Lyssavirus / rabies prophylaxis conducted by the Public Health Unit through an audit / review of each Cat III exposure to terrestrial animals overseas or bats in Australia (QIP) | <ul style="list-style-type: none"> Review current processes including documentation requirements and information currently provided including consent forms and TGA forms. Review communication systems with Vaccine Centre, GPs and ED departments including investigating the feasibility of electronic communication via PowerChart. | <ul style="list-style-type: none"> 100% compliance with TGA Category A forms being returned (if applicable) Communications established with Information Management and Technology Division and permission sought for write access to PowerChart Social media friendly fact sheets developed on rabies awareness for travellers Review of communication systems with partner agencies conducted and any shortcomings addressed | Leng Boonwaat and CD team | June 2018 | Population Health Operational Plan 1.5, 2.1, 7.1.5 |

Business Plan: Communicable Diseases (continued)

| Task No. | Strategy | Actions (how) | Key Performance Indicator | Responsibility with | Timeframe for completion | Links To SWSLHD or Facility Plan |
|----------|--|--|--|---------------------------|--------------------------|---|
| 22. | Improve the management of suspected and confirmed cases of measles | <ul style="list-style-type: none"> Review measles data gathering processes such as data collection tools Develop a strategic plan for managing measles within South Western Sydney | <ul style="list-style-type: none"> Data gathering processes have been reviewed and recommendations acted upon and incorporated into operational activities SWSLHD PHU measles strategic plan written, comments received by stakeholders and incorporated into the plan Evaluation processes developed for monitoring implementation of the strategic plan | Leng Boonwaat and CD team | June 2018 | Population Health Operational Plan 1.3, 1.5 |

Business Plan: Communicable Diseases (continued)

| Task No | Strategy | Actions (How) | Key Performance Indicator | Responsibility with | Timeframe for completion | Links to SWSLHD or Facility Plan |
|---------|---|---|--|---------------------|--------------------------|--|
| 23. | Ensure future capacity in managing communicable diseases within current and future members of the workforce | <ul style="list-style-type: none"> Make secondment and work experience opportunities available within the CD team to staff from other departments and current students enrolled in courses relevant to communicable diseases | <ul style="list-style-type: none"> Orientation process developed for students or staff on secondment At least one placement within the CD team has been successfully completed | Leng Boonwaat | June 2018 | Population Health Operational Plan 4.1.5, 4.3.1, 4.3.2 |

POPULATION HEALTH QUALITY IMPROVEMENT PLAN TEMPLATE

Quality Improvement Plan for Operational Plan Action No. 1.5.10

| Action 1.5.10 | | Improve the quality of the adolescent (school) immunisation program | | | | | |
|-------------------------|-------------------------|--|--|-----------------------------------|---|--|-----------------------|
| Identified Issue | | Continuous need for quality assurance, improved consent form completion and record keeping processes for the school immunisation program to comply with Health Protection NSW requirements | | | | | |
| Action Number | Priority (L/M/H) | What outcome or goal do you seek? | How will you achieve this outcome or goal? (Steps) | By Who? | Success Measure | By When? | Progress Notes |
| 1.5.10 | Medium | <ul style="list-style-type: none"> Improve the accuracy and completeness of school immunisation program records and data. Ensure high quality coordination and delivery of the school immunisation program in SWSLHD | <ul style="list-style-type: none"> Check the accuracy of all scanned school records. Review exception reports received from Health Protection. Conduct an annual independent audit of the school program. Evaluate the implementation of the Year 11 and 12 meningococcal ACWY vaccination program. Explore recruiting an immunisation data surveillance officer. | Janice Kitson / immunisation team | <ul style="list-style-type: none"> 100% of school records scanned and accuracy checked Exception records reviewed Annual independent audit conducted Evaluation of meningococcal ACWY program conducted and evaluation report written | <p>Ongoing</p> <p>Ongoing Jan 2018</p> <p>Jun 2018</p> | |

Quality Improvement Plan for Operational Plan Action No. 2.1.4 and 3.1.2

| Action 2.1.4 and 3.1.2 | | | Knowledge/skills improvement in pool maintenance by councils and pool managers | | | | |
|-------------------------------|-------------------------|---|--|--|---|--|-----------------------|
| Identified Issue | | | Gaps in knowledge and practice identified by the PHU Environmental Health team | | | | |
| Action Number | Priority (L/M/H) | What outcome or goal do you seek? | How will you achieve this outcome or goal? (Steps) | By Who? | Success Measure | By When? | Progress Notes |
| 2.1.4 and 3.1.2 | Medium | <ul style="list-style-type: none"> Reduction in number of pool related cryptosporidium notifications Compliance with swimming pool standards in the Public Health Act | <ul style="list-style-type: none"> Hold a swimming pool forum for council pool staff, pool managers and EHOs to increase their awareness and knowledge of: (1) diseases associated with pools and their management; (2) changes in public health legislation; (3) advances in pool chemistry testing, technology and testing equipment; (4) Regulation; and (5) availability of educational resources Invite expert guest speakers to present on certain topics Encourage council pool staff, pool managers and EHOs to attend and interact in discussions and interactive sessions on aspects of environmental health management of pools, access to information | Peter Cavagnino / John Birkett / Scott Rorke | <ul style="list-style-type: none"> Forum organised and held Increase in compliance with pool standards in Public Health Act Reduction in number of pool-related disease notifications and prompt response to incidents | <p>June 2018</p> <p>Ongoing</p> <p>Ongoing</p> | |

Quality Improvement Plan for Operational Plan Action No. 2.1.4 and 3.1.2

| Action 2.1.4 and 3.1.2 | | | Increase knowledge and compliance with new Legionella control requirements | | | | |
|-------------------------------|-------------------------|--|---|--|---|--|-----------------------|
| Identified Issue | | | Need for education of council staff, building owners/managers and industry around new requirements for Legionella control in the Public Health Act and Regulation | | | | |
| Action Number | Priority (L/M/H) | What outcome or goal do you seek? | How will you achieve this outcome or goal? (Steps) | By Who? | Success Measure | By When? | Progress Notes |
| 2.1.4 and 3.1.2 | Medium | <ul style="list-style-type: none"> Increase compliance with new Legionella control requirements in Public Health Act and Regulation | <ul style="list-style-type: none"> Hold a Legionella control forum(s) for council staff, building owners/managers and industry to increase their awareness and knowledge of: (1) Legionnaires' disease; (2) changes in public health legislation; and (3) availability of educational resources Invite expert guest speakers to present Encourage attendance by council staff, building owners/managers and industry representatives | Peter Cavagnino / John Birkett / Scott Rorke | <ul style="list-style-type: none"> Legionella control forum held Increase in compliance with Legionella control requirements in Public Health Act and Regulation Reduction in number of Legionnaires' disease notifications Prompt response to notifications of Legionnaires' disease | June 2018 Ongoing Ongoing Ongoing | |

Quality Improvement Plan for Operational Plan Action No. 3.2.5

| Action 3.2.5 | | | Continuous improvement of Aged Care Facility (ACF) influenza outbreak preparedness and management | | | | |
|-------------------------|-------------------------|--|---|----------------|--|-----------------------------------|-----------------------|
| Identified Issue | | | Under-reporting and late reporting of influenza outbreaks by ACFs | | | | |
| Action Number | Priority (L/M/H) | What outcome or goal do you seek? | How will you achieve this outcome or goal? (Steps) | By Who? | Success Measure | By When? | Progress Notes |
| 3.2.5 | Medium | <ul style="list-style-type: none"> Improve ACF preparedness for and management of influenza outbreaks Increase the proportion of ACF influenza outbreaks notified to the PHU | <ul style="list-style-type: none"> Organise an influenza workshop or teleconference/s with ACFs in preparation for the 2018 influenza season Review all lab based influenza notifications and follow up those originating from aged care facilities | CD team | <ul style="list-style-type: none"> Influenza workshop or teleconference held with SWS ACFs 100% of lab based influenza notifications originating from ACFs followed up | <p>April 2018</p> <p>Nov 2018</p> | |

Quality Improvement Plan for Operational Plan Action No. 3.2.5

| Action 3.2.5 | | | Improve the system for neonatal hepatitis B data collection | | | | |
|-------------------------|-------------------------|--|---|------------------------------|--|---|-----------------------|
| Identified Issue | | | Missing maternal and neonate hepatitis B related data and data entry errors from SWSLHD facilities resulting in lower hepatitis B KPIs | | | | |
| Action Number | Priority (L/M/H) | What outcome or goal do you seek? | How will you achieve this outcome or goal? (Steps) | By Who? | Success Measure | By When? | Progress Notes |
| 3.2.5 | Medium | <ul style="list-style-type: none"> Improve the completeness and consistency of neonatal hepatitis B data in SWSLHD Develop an improved system for collecting and reporting neonatal hepatitis B data to the PHU to assist with compilation of quarterly reports to Health Protection | <ul style="list-style-type: none"> Obtain and review a snapshot of SWSLHD neonatal hepatitis B data to identify data issues Liaise with key stakeholders across SWSLHD and Sydney South West Private Hospital to inform the development of an improved system for neonatal hepatitis B data collection to meet the requirements of the updated 'NSW Health Neonatal Hepatitis B Prevention and Vaccination Program' policy Develop and implement a new neonatal hepatitis B data collection system | Janice Kitson / Khoi Dang Do | <ul style="list-style-type: none"> Neonatal hepatitis B data snapshot reviewed and data issues identified Meeting held with key stakeholders across SWSLHD and Sydney South West Private Hospital New system developed for monthly neonatal hepatitis B data collection New system implemented for monthly neonatal hepatitis B data reporting from SWSLHD facilities to PHU Quarterly reports submitted by PHU to Immunisation Branch, Health Protection by the due date | <p>Aug 2017</p> <p>Sept 2017</p> <p>Dec 2017</p> <p>Jun 2018</p> <p>Ongoing</p> | |

Quality Improvement Plan for Operational Plan Action No. 3.2.5

| Action 3.2.5 | | | Improve the management of lyssavirus / rabies prophylaxis conducted by the Public Health Unit | | | | |
|-------------------------|-------------------------|---|---|----------------|--|---|-----------------------|
| Identified Issue | | | Areas for improvement identified in communication between the PHU and other health providers for lyssavirus / rabies prophylaxis | | | | |
| Action Number | Priority (L/M/H) | What outcome or goal do you seek? | How will you achieve this outcome or goal? (Steps) | By Who? | Success Measure | By When? | Progress Notes |
| 3.2.5 | Medium | <ul style="list-style-type: none"> Improve communication between the PHU and other health care providers involved in providing lyssavirus / rabies prophylaxis Communicate with travellers to high risk areas around rabies awareness | <ul style="list-style-type: none"> Audit the management of prophylaxis by the PHU for cat III exposures to terrestrial animals overseas or bats in Australia Review current processes including documentation requirements and information currently provided including consent forms and TGA forms Review communication systems with the State Vaccine Centre, GPs and ED departments including investigating the feasibility of electronic communication via PowerChart. Develop social media friendly fact sheets on rabies awareness for travellers | CD team | <ul style="list-style-type: none"> 100% compliance with TGA Category A forms being returned (if applicable) Communications established with IM&TD and permission sought for write access to PowerChart Social media friendly rabies awareness fact sheets developed Review of communication systems with partner agencies conducted and any shortcomings addressed | <p>June 2018</p> <p>June 2018</p> <p>June 2018</p> <p>June 2018</p> | |



Health
South Western Sydney
Local Health District

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