

PLAN-Develop and implement interventions to improve the immunization rates for children

1. Getting Started

- As of June 2014, the childhood immunization coverage in Bryan County was 74%
- The 2020 goal for childhood immunization is 80%
- Room for improvement identified in Bryan County
- By the end of project timeline, coverage in Bryan County was 77.4%
- Demonstrated 3.4% increase in the childhood immunization coverage in Bryan County following the QI project..

2. Assemble the Team

- The team is comprised of members from the two participating partner agencies, the Oklahoma Health Care Authority and the Oklahoma State Department of Health

- Team members represent units and divisions within the agencies that can directly impact the intervention strategies and improve the immunization outcomes
- Team members worked to develop skills in improvement strategies and reporting.

3. Examine the Current Approach

- OSDH Nursing staff screens all clients for immunization needs at every visit. The nurse promptly creates a postcard reminder for the recommended next series of shots coming due. This postcard is mailed 7 - 10 days prior to due date.
- OHCA and OSDH presented a community spotlight at the Bryan

County Turning Point Coalition focusing on Immunization rates.

- OSDH and OKDHS have partnered together to verify that licensing requirements are being fulfilled at all childcare centers; these centers should screen and maintain up to date records of their students.
- One consideration for the incomplete records is that Bryan County lies on the Texas border. Therefore many children's medical homes are Texas providers. These providers are not required to document immunization shots in OSIS.

4. Identify Potential Solutions

- Development of slogan to use in campaign interventions used by OSDH and OHCA.

Protect Them...
Immunize Today!



AIM Statement-Through the joint targeted, outreach efforts of OSDH and OHCA, by December 2014, the % of completed (4:3:1:3:3:1) immunization series for the age group 19-35 months, in Bryan County, will have increased by 5% from 74 %, the established baseline as of December 31, 2013 (period with no intervention).

- Conduct education and outreach to providers via fax blasts, newsletters, and face to face trainings who serve the targeted population.
 - Conduct education and outreach to members (parents and children) via well child letters, call wait messages, and newsletters.
 - Continue current initiatives that are in place within OSDH and OKHCA. The Immunization Field Consultant will track the letters and calls made to children identified as “past due” for immunizations in OSIS through the “recall” function.
- ### 5. Develop an Improvement Theory
- Outreach to providers will encourage them to suggest timely immunization efforts to their patients.
 - Education of parents will encourage them to ensure their children are appropriately immunized.
 - The education and outreach efforts

will improve the immunization rates for the targeted area.

DO- Implement Outreach and Education Interventions

6. Test the Theory

- Provider packets were developed by OHCA and OSDH, in addition to an immunization centered fax blast, which were distributed to all SoonerCare providers in Bryan County. These packets covered ways to reduce missed opportunities and how to raise awareness of the physician’s role in immunizations. Both OHCA and OSDH staff regularly visited face-to-face with providers in Bryan County to specifically target immunization administration, billing, and OSIS requirements.
- SoonerCare member educational materials were jointly developed by OHCA and OSDH staff for distribution; the materials included a vaccination schedule, vaccination

handbook, vaccination schedule magnet and growth chart.

- The importance of vaccinating children was conveyed through OHCA and OSDH hold messages, provider publications, news releases, website slogans and banners, and various social media accounts.

CHECK- Use data to check the results

7. Check the Results

- Bryan County Health Department staff reduced their number of missed opportunities. In addition the clinic saw a 44% decrease in the children incomplete on their Client Vaccine Series reports.
- OSDH staff distributed 2453 member educational packets to private provider offices, County Health Department clients, the local Women’s Center (Birthing hospital), and childcare centers.

Immunizations QI Workgroup Storyboard



- OHCA staff distributed 1105 member educational packets to currently contracted SoonerCare Primary Care Providers and completed 37 on site visits.

Rates for children 19-35 months for Bryan County (4:3:1:3:3:1) Immunization Series		
	Complete	Incomplete
Before	73.9%	26.1%
After	77.4%	22.6%

ACT- Standardize the improvement and establish future plans

8. Standardize the Improvement or Develop New Theory

- After the end of the intervention period, the team is very satisfied with the response to the intervention efforts. The direct outreach to providers and packets

for the members brought increased awareness to the need for appropriate immunizations.

- These efforts will continue to be effective if the outreach to providers and members are incorporated into the standard educational efforts of both OSDH and OHCA.
- In order to achieve better results, the team would see all planned interventions achieved in the scheduled time, these missed opportunities for education and emphasis may have contributed to not achieving the 5% goal established in the AIM statement.

9. Establish Future Plans

- Phase II of this project will expand beyond the Bryan County border to

include the 4 county territory covered by OSDH VFC Immunization Field Consultant, including Bryan, Choctaw, Pushmataha, and McCurtain Counties.

- Encompass Spanish materials in member packets as the four county regions have a high percentage of Spanish speaking households.
- Provide hands-on training for SoonerCare providers to specifically resolve claims errors for vaccine administration.
- Identify partnership opportunities for free, or low-cost materials, that can be included in both the member and provider educational packets.