A Regional Approach to Address Childhood Immunization Rates: The Central Oregon Immunization Rate Improvement / AFIX Project

Goal:

Increase immunization rates of Crook, Deschutes, and Jefferson County twoyear-olds by implementing the AFIX Program in CCO participating clinics who see two- year-olds and younger.

Funding Source:

Funding was provided by PacificSource Health Plans (Central Oregon CCO) through Quality Incentive Metric (QIM) performance funds. Project objectives are in alignment with the Childhood Immunization QIM and the \$149,000 budget covers staffing, operational expenses and incentives for the 3 year project duration.

..... Common Strategies:

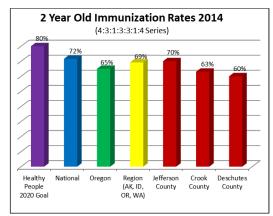
- Routinely measure rates and share with clinic staff
- Implement 15 month well-child visit
- Reminder/Recall Identify patients due or past due for vaccines and schedule appointments
- Reschedule "No Shows"
- Pre-schedule next appointment
- Data review and clean-up (cross-check Electronic Medical Record with ALERT Registry data, inactivate patients no longer being seen by clinic, enter historical immunizations)

Project Description

This is a three-year project to increase two-year-old immunization rates at the local level using the Center for Disease Control's (CDC) AFIX Program in Central Oregon. The project includes all two-year-olds being seen at Oregon Health Plan participating clinics regardless of insurance type.

Background

In 2014, low two-year-old immunization rates in the Central Oregon Region were designated as a priority for a subcommittee of the Central Oregon Health Council. A workgroup comprised of county health department and clinic staff was assigned to make recommendations to address the low rates and meet the Childhood Immunization Quality Incentive Metric (QIM). The group



recommended implementation of the existing, evidence-based CDC Program called AFIX at the local level. A project proposal was created and submitted to PacificSource for funding. The project was approved and funded in March, 2016.

What is AFIX?

AFIX is a quality improvement program developed by the CDC to raise immunization coverage levels and improve standards of practice at the provider level.

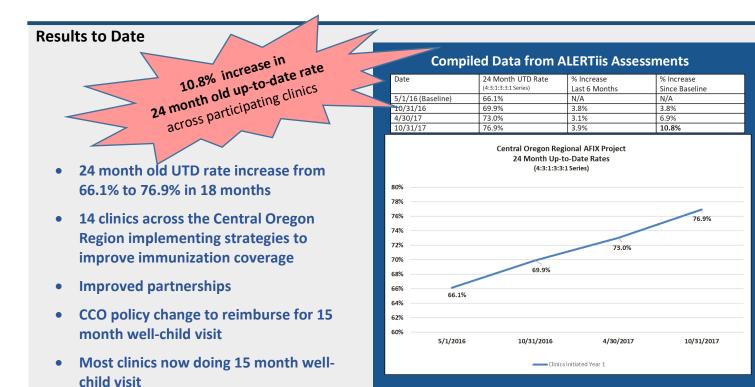
- Assessment of the healthcare provider's vaccination coverage levels and immunization practices. ALERT Registry Assessment Reports were used to gather quantitative data such as the two-year-old immunization rate and percentage of patients meeting age appropriate benchmarks for each vaccine series. A Site Visit Questionnaire was used to gather qualitative data about the clinic's current policies and practices to support vaccine coverage.
- Feedback of results to the clinic along with a facilitated discussion and selection of 2-3 strategies annually to improve processes, immunization practices, and coverage levels.
- Incentives to encourage clinic participation, provide immunization education and reward improved performance. Examples include clinical resources, education events, funds for staff to attend immunization trainings and conferences.
- eXchange of information with clinics to monitor progress towards quality improvement in immunization services and vaccine coverage levels. Immunization Champions from each clinic attend "Best Practice" Meetings twice annually to share successes, challenges and best practices for quality immunization services.

Challenges

- Staff turnover is inevitable. When key staff involved in immunization quality improvement leave, someone new needs to be identified, brought up to date and motivated to continue the effort.
- Clinics also have competing priorities. It is important that strategies to improve vaccine coverage be flexible and align with the clinic's broader goals.

Lessons Learned

- Immunization rates decreased across all clinics during the second year of a child's life. Clinics that implemented a 15 month well-child visit saw improvement in the 24 month up-to-date rate.
- There are many opportunities for better data, i.e. historical immunization entry, accurate patient lists, correct addresses.
- On-going education makes a difference in keeping immunizations a priority for clinics!



Next Steps

Participating clinics are reviewing data and selecting strategies for the final year of the project. The project team will begin to plan for sustaining and improving upon the positive results so far once the project comes to an end in Spring, 2019. Best Practice Meetings will likely continue for education, motivation, accountability and support.

