



Plan

1. Identify the Problem or Process that can be Improved

A recent audit by the Wisconsin Immunization Registry (WIR) indicated that the Green Lake County Health Department is missing opportunities to immunize a significant number of clients who would potentially benefit from mandated or optional vaccines.

2. Assemble the team



Staff: L-R: Nick Zupan, Tracy Soda, Jackie Westover, Judy Kasuboski, Kathy Munsey, Renee Peters, Jeri Loewe, absent—Marilyn Voeltner

AIM Statement:

By July 21, 2013, Green Lake County Health Department will decrease missed immunization opportunities for children ages 11-18 years insured through BadgerCare or Medical Assistance (MA) from 59% to 40%.

3. Examine the Current Approach and Identify the Possible Solutions

We used a variety of tools to examine the process for immunizing adolescents including a fishbone diagram, followed by a process map and a swim lane diagram which further identified duties of staff. The entire staff

Green Lake County QI Project Reducing the Number of Missed Opportunities

determined that the number of missed opportunities were either due to: a lack of standardized immunization procedures, obstacles presented by parents and/or providers, and the availability of all necessary vaccines at the immunization clinics. For example: some vaccines must remain frozen, and our outlying clinic sites do not have freezer facilities which means we could compromise the integrity of the vaccine, so it is only available at our home site.

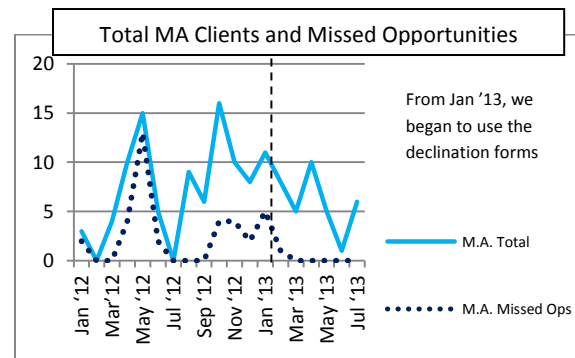
Do

4-5. Develop & Test the Improvement Theory

To reduce the percentage of missed opportunities we standardized the process & educated staff. Staff members reviewed the immunization procedure and learned how to use a declination form. Parents signed the form if they declined any of the vaccines that we offered. Using this form prevented the visit from being recorded on WIR as a missed opportunity. We compiled the data by tabulating the number of visits from clients on MA 11-18 years of age, and which of these visits were recorded as a missed opportunity.

Study

6. Study the results



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The graph shows the total number of clients on MA and the number of missed opportunities from each month starting January 2012. The dotted line indicates when we began to implement the declination form.

In 2013 (Jan-Jul), we have been able to reduce the percentage of visits that result in missed opportunities compared to 2012. We found that from January through July 2012, 59% of clients on MA had a missed opportunity. During those same months in 2013 with the inclusion of the declination form & parental education, **only 13%** of visits from clients on MA resulted in a missed opportunity.

7. Lessons Learned and Future Plans

We have found the declination form & procedural changes to be successful in the early stages of use, and we will now recommend this process for other providers.

Act

8. Standardize the Improvement or Develop a New Theory

We will continue to use the declination form for all clients and we will measure the success of this strategy alone and determine how to pair it with other strategies (education of the parents) to further reduce the number of missed opportunities. We have decided to survey parents to see why they decline vaccines. Additionally we want to survey providers to see why they miss opportunities. Finally, we would like to track the number of parents who initially declined vaccines, but changed their mind once they were educated about the various formulations and their safety and side effects.