

CAPITAL AREA HEALTH NETWORK

We are the **heart** of the community



PEDIATRIC IMMUNIZATIONS DOCUMENTATION

COMPLIANCE AND STAFF CROSS TRAINING

CHC Leadership Institute Learning program 2017-18

Capstone Teach Back: June 13, 2018



1. FOCUS

- To improve our compliance with pediatric immunizations for children by their second birthday according to UDS Childhood Immunization Guidelines.

2. TEAM

- **Shea Easley, Data Analyst**
- **John Futrell, Facility Manager**
- **Nana Katanda, LPN Lead**
- **Rhonda Monroe, RN Lead**
- **Lauren Winston, Grant Manager**

3. NEED

Focus Areas In Need Of Improvements:

- In 2017, the percentage of children 2 years of age who received age appropriate vaccines at CAHN by their 2nd birthday was 32%, based on manual **chart audits**.
 - However, our internal EHR, eClinicalWorks, reported only 2% compliance.
- Development and training on our internal data entry processes to ensure our EHR accurately reflects our pediatric vaccination rates.
- Improve attendance with pediatric follow-up visits to complete age appropriate compliance with the pediatric immunization schedule.

4. OBJECTIVES

What We Aimed To Achieve:

- Improve internal processes to increase rate of childhood immunizations by 2nd birthday.
- Train staff to manually and accurately enter immunization data into patient EHR.
- Improve external communication with parents/guardians of pediatric patients in need of immunizations.
- Enhance and streamline communication on follow-up visits in alignment with the CDC Advisory Committee on Immunization Practices vaccination schedule.

5. ASSETS

People

Pediatric Care Team

- 2 Pediatricians, 2 LPN's, 2 CMA's

Scheduling Team

- PSR's (Patient Service Representatives)
- CCR's (Call Center Representatives)

Nurse Management Team

- Internal Quality Assurance (QA) Team

Systems

- Virginia Immunization Information System (VIIS)
- eClinicalWorks (eCW)

Resources

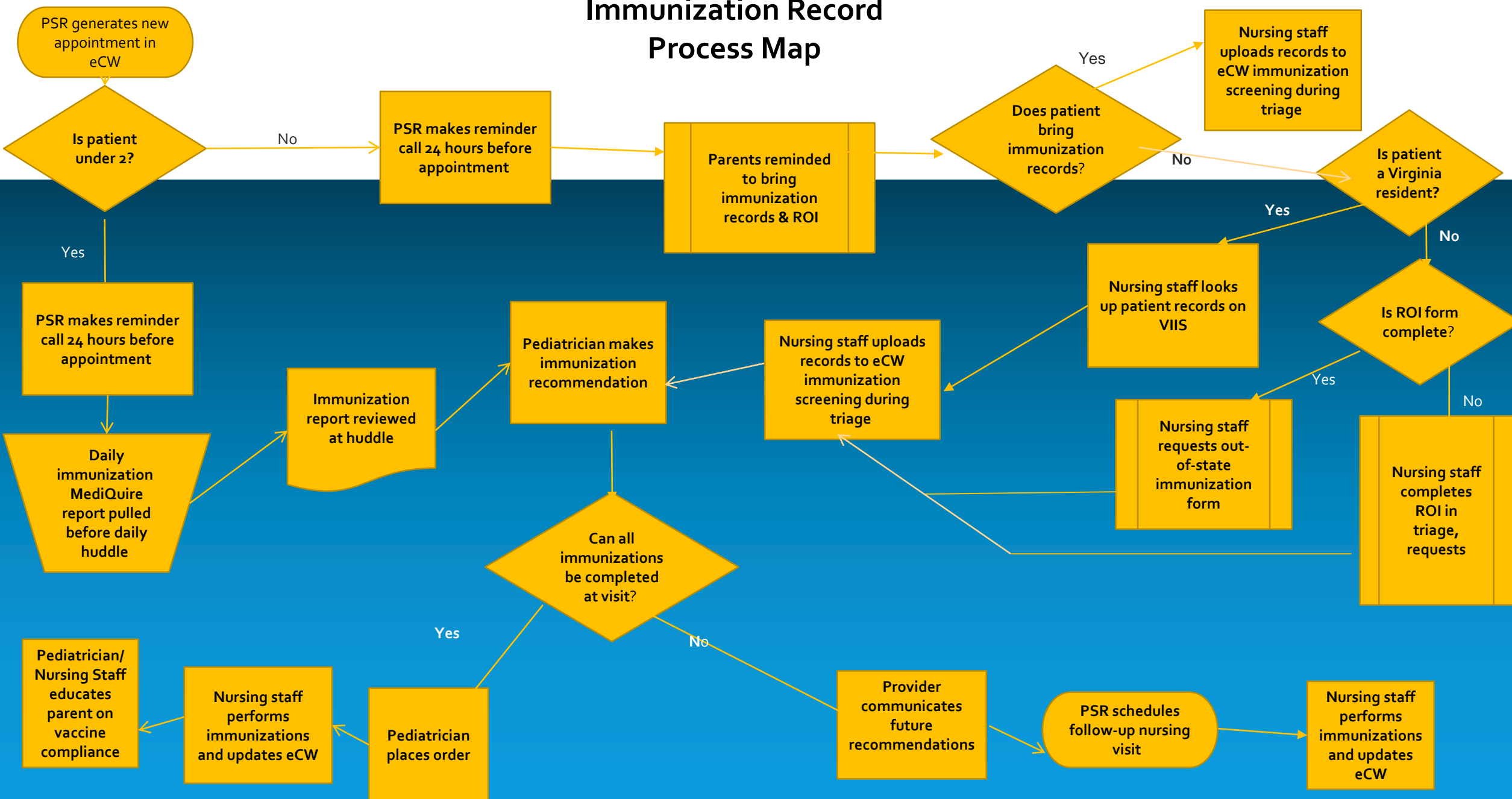
- CDC/ACIP Immunization Schedule
- UDS Guidelines

6. ACTION STRATEGIES

Strategies We Utilized To Excute The Project:

- Monthly UDS reporting
- Manual chart audit of non-compliant patients identified by UDS report
- Manual comparison of EHR and VIIS vaccination records
- Identify current state process
- Develop process map of current state

Immunization Record Process Map



7. TEAM DEVELOPMENT

Team Development Activities:

- Biweekly group meetings
- CHC Leadership Meeting
- Developed immunization assessment questions
- Pediatric nursing staff training
- Pediatrician-led scheduling team training

8. TESTING & REFINEMENT

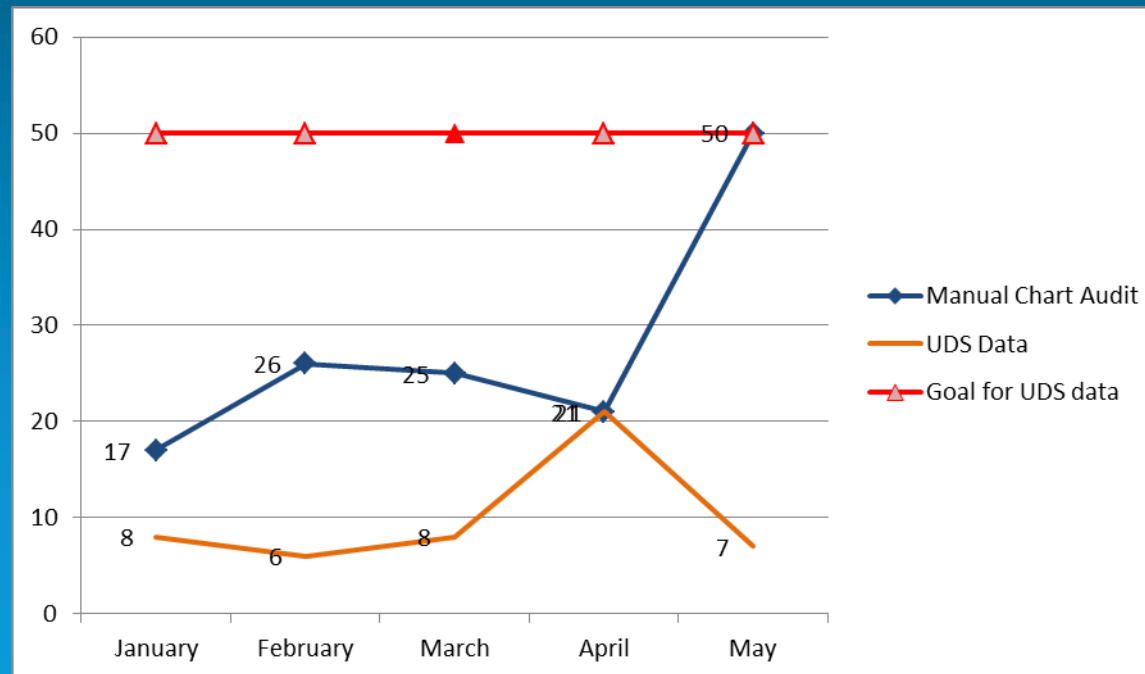
Strategies, Refinement And Planning:

- Manual vaccine input vs. scanned vaccine input:
(Identified patient charts that were reflected as being noncompliant per UDS report)
 - Manually entered historic vaccine records
 - Scanned historic vaccine records into chartComparison:
 - UDS Report (Table 6B Section C Immunization) From eCW EBO Report
- Pediatric staff began calling parents/guardians of patient under 2 to schedule appointments for immunizations.
- Manual entry/updating of noncompliant immunization records

9. RESULTS TO DATE

Project Results To Date, Planned Next Steps?

May 2018 UDS Report reflected 7% compliance, compared to 50% manual chart audit



RESULTS TO DATE CONTINUED

Project Results To Date, Planned Next Steps?

- Educate new staff on the importance of vaccination record documentation in EHR
- Educate new PSR/CCR staff on proper pediatric scheduling to allow continuation of care
- Maintain a clear line of communication between front and back end along with patient's parent/guardian

10. LESSONS LEARNED

What We Learned:

- Manual data entry process of vaccine records during the healthcare visit is still critical in maintaining up-to-date/accurate records
- Requires the entire team, from scheduling to back end reporting, to ultimately improve compliance
- Dependency on data through technology (versus manual data collection) on understanding reporting

PEDIATRIC
IMMUNIZATION
COMPLIANCE



QUESTIONS?

THANK YOU FOR YOUR ATTENTION