Prenatal Tdap Workgroup
March 28th, 2019

Immunization Branch
California Department of Public Health
Agenda

I. Welcome and Introductions

II. Increasing Adult Immunization Rates through Obstetrician-Gynecologist Partnerships, presentation by Sarah Wright from the American College of Obstetricians and Gynecologists (ACOG)

III. Q&A

IV. Announcements
Housekeeping Rules

• Slides now posted on Prenatal Tdap Toolkit page: http://eziz.org/resources/pertussis-promo-materials/prenatal-tdap/

• Today’s presentation will be recorded

• We will be muting all lines until the end of the presentation

• Once lines are open....please speak up, ask questions, and share your ideas!
Welcome, Sarah!

Sarah Wright, MA
Senior Program Manager
American College of Obstetricians and Gynecologists (ACOG)
Immunization, Infectious Disease, and Public Health Preparedness Department
Increasing Adult Immunization Rates through Obstetrician-Gynecologist Partnerships

ACOG Adult Immunization Cooperative Agreement

Sarah Wright, MA, Senior Program Manager
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Acknowledgements

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Project Background

• 4-year cooperative agreement funded by CDC
  ‣ 3-year demonstration phase working directly with ob-gyns
  ‣ 1-year dissemination phase to share findings from the demo phase

• Aimed at increasing rates of 5 adult immunizations in pregnant and non-pregnant populations:
  1. Tdap
  2. Influenza
  3. Pneumococcal
  4. Hepatitis B
  5. Herpes zoster
Project Background cont.

• **Overall goal:** Increase immunization rates and incorporate immunizations into routine ob-gyn care

• **Final project outcome:** Develop and disseminate effective “strategies” for integrating immunizations into routine ob-gyn practice
Immunization Champions

• 19 practices in two states (California and Massachusetts) participated
  ‣ Each with an ob-gyn “Immunization Champion”
  ‣ Diverse cohort of practices
  ‣ On-going collaboration, technical support, and problem solving provided by ACOG
Targeted Strategies

• Standing orders
• Strong recommendations
• Consistent documentation
• IIS enrollment
• Immunization referral
• Prompting
• Engaging practice staff
• Patient & health care provider education and use of resources
Collaboration & Connections

• Collaboration with state health departments
  ‣ Resource & information sharing
  ‣ IIS technical assistance
  ‣ Learning Lab presentations
  ‣ Support systems for Champions

• Partner with outside organizations to address shared goals
• Connecting Champions with each other
• Connecting Champion practices to immunization resources/materials for their practices
Evaluation & Data Collection Measures

• Quantitative data gathered through:
  ‣ Year 1 and Year 3 randomized chart reviews
  ‣ Annual practice surveys

• Qualitative data gathered through:
  ‣ Quarterly check-in calls with Champions
  ‣ Annual in-person visits to Champion practices
  ‣ Annual all-group Learning Labs
  ‣ Annual ob-gyn focus groups at the ACOG Annual Clinical and Scientific Meetings
## Project Findings: Immunization Rates

### Increasing Adult Immunization Rates Project Cohort:
Comparisons of Immunization Rates by Immunization and Project Year

<table>
<thead>
<tr>
<th></th>
<th>Immunization Rates at Baseline</th>
<th>Immunization Rates at Year 3</th>
<th>Immunization Rates Percent Change Over Course of Project</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tdap</td>
<td>24%</td>
<td>63%</td>
<td>163%</td>
</tr>
<tr>
<td>Influenza</td>
<td>21%</td>
<td>35%</td>
<td>66%</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>55%</td>
<td>72%</td>
<td>31%</td>
</tr>
<tr>
<td>Herpes Zoster</td>
<td>10%</td>
<td>33%</td>
<td>233%</td>
</tr>
<tr>
<td>Pneumococcal</td>
<td>30%</td>
<td>33%</td>
<td>11%</td>
</tr>
</tbody>
</table>
### Project Findings: Missed Opportunities

**Increasing Adult Immunization Rates Project Cohort:** Comparisons of Missed Opportunity Rates by Immunization and Project Year

<table>
<thead>
<tr>
<th>Vaccine</th>
<th>Missed Opportunities at Baseline</th>
<th>Missed Opportunities at Year 3</th>
<th>Missed Opportunities Percent Change Over Course of Project</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tdap</td>
<td>76%</td>
<td>37%</td>
<td>-51%</td>
</tr>
<tr>
<td>Influenza</td>
<td>79%</td>
<td>65%</td>
<td>-17%</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>45%</td>
<td>28%</td>
<td>-38%</td>
</tr>
<tr>
<td>Herpes Zoster</td>
<td>90%</td>
<td>67%</td>
<td>-26%</td>
</tr>
<tr>
<td>Pneumococcal</td>
<td>70%</td>
<td>67%</td>
<td>-4%</td>
</tr>
</tbody>
</table>

**Missed opportunity** = eligible for a vaccine but no record of contraindication, receipt, or refusal of the vaccine
Identifying Effective Strategies

• Through careful tracking of the project data and activities pilot-tested, ACOG identified the immunization improvement strategies that were:
  ‣ Successfully implemented by the Champions
  ‣ Capable of driving change at the practice level
  ‣ Easy to implement in all practice settings
  ‣ Sustainable over time
  ‣ Applicable to the wider ACOG membership
# Strategies for Effectively Integrating Immunizations into Routine Obstetric-Gynecologic Care

1. Administer routinely discussed and recommended vaccines, which at a minimum include influenza, Tdap, and HPV.

2. Create a culture of immunization by educating and involving all staff in immunization processes. Delegate the responsibilities of maintaining and championing an immunization program to a team of staff, as appropriate for your practice structure.

3. Develop a standard process for assessing, recommending, administering, and documenting vaccination status of patients.

4. Utilize existing systems and resources to conduct periodic assessments of immunization rates among patients to determine if and where progress is needed.
Project Summary Resources

• Increasing Adult Immunization Rates through Obstetrician-Gynecologist Partnerships project report

• Strategies for Effectively Integrating Immunizations into Routine Obstetric-Gynecologic Care tip sheet
Strategies for Effectively Integrating Immunizations into Routine Ob-Gyn Practice
Administer routinely discussed and recommended vaccines, which at a minimum include influenza, Tdap, and HPV.

• **Talk to each patient directly.** Make a strong recommendation, which includes:
  ‣ The recommendation: "As your physician, I recommend you get the flu vaccine."
  ‣ A timeframe: "I want you to get the vaccine today before you leave."
  ‣ A benefit to the patient: "The vaccine is important for your health."

• **Train staff** on how to deliver strong immunization recommendations

• **Document declinations** and reintroduce discussion at subsequent visits

• **Order vaccine early**—pre-booking flu vaccine helps secure lower pricing

• **Develop a referral system**—if feasible, establish a relationship with an existing pharmacy, health care provider, or clinic for referrals

• **Expand immunization** offerings methodically
Create a culture of immunization by educating and involving all staff in immunization processes. Delegate the responsibilities of maintaining and championing an immunization program to a team of staff, as appropriate for your practice structure.

- Educate clinicians and staff on importance of immunizations for patients & themselves at regular intervals
- Educate clinicians and staff on role non-physician staff can play
- Develop scripts for staff to follow when promoting immunizations
- Utilize front desk staff to promote immunizations as appropriate
- Display patient education materials
- Delegate immunization program duties to an Immunization Champion team or individual
Develop a standard process for assessing, recommending, administering, and documenting vaccination status of patients.

- Consider implementing immunization **standing orders** for vaccines carried on-site
- When standing orders are not feasible, develop a **standard immunization process**
- **Gather input from staff** prior to implementation of process improvements
- Consider shifting **administration of immunizations early in the patient visit**
- Create a **natural prompt** for Tdap administration
- **Build immunization reminder language** into intake, check-in, and check-out forms
- When feasible, enroll in your state’s **immunization information system (IIS)**
Utilize existing systems and resources to conduct periodic assessments of immunization rates among patients to determine if and where progress is needed.

• Periodic assessments can highlight if and where improvements are needed
• Examples include:
  ‣ Chart reviews
  ‣ Comparisons of immunization billing codes to number of patients seen over a certain timeframe
  ‣ Comparisons of vaccine purchasing and doses administered to the number of vaccine eligible patients over a certain timeframe
• When assessing immunization rates, consider starting with just one population group or immunization over a specific timeframe
• Develop a plan for how you will use the findings of your immunization rates assessment
Dissemination Phase Objectives

• Fourth and final year of the project
• Share the Strategies widely among ACOG members and partners
• Gather feedback on the most impactful ways to share/promote the Strategies to ob-gyns
  › Via provider surveys & focus groups
• Assess impact of the Strategies on ob-gyns
Dissemination Activities

• Social media campaigns to members and other women’s health care providers
• ACOG email blasts, newsletters, etc.
• *Optimizing Immunization Programs for Ob-Gyn Practices* tool kit
• Exhibiting and/or presenting at meetings and conferences of partner organizations
Challenges & Opportunities
Ongoing Challenges

• Engaging colleagues & staff
• Consistently delivering strong recommendations
• Implementing standing orders
• Enrollment in and data transmission to the state immunization information systems (IIS)
• Reimbursement
Opportunities

• Engaging colleagues & staff
• Standard immunization process vs. standing orders
• Enthusiasm of the Champions
Benefits of a Demonstration Project

• Continuous quality improvement
• Learn what works and what doesn’t
• Flexibility and adaptability to respond to feedback and emerging needs
• Sharing of lessons learned
  ‣ Between Immunization Champions
  ‣ With immunization stakeholders
  ‣ With other ob-gyns
  ‣ With state health department partners
ACOG Immunization Resources

www.ImmunizationforWomen.org
www.acog.org/immunization
Adult Immunization Project Resources

• Strategies for Integrating Immunizations into Routine Obstetric-Gynecologic Practice tip sheet
• Developing an Immunization Referral System tip sheet
• Seasonal Influenza Vaccination Programs: Tips for Optimizing Practice Management tip sheet
• Optimizing Immunization Programs in Obstetric-Gynecologic Practices tool kit
ACOG Immunization Clinical Guidance

- Immunization Implementation Strategies for Obstetricians-Gynecologists, **Committee Opinion #772**
- Assessment and Treatment of Pregnant Women With Suspected or Confirmed Influenza, **Committee Opinion #753**
- Maternal Immunization, **Committee Opinion #741**
- Influenza Vaccination During Pregnancy, **Committee Opinion #732**
- Update on Immunization and Pregnancy: Tetanus, Diphtheria, and Pertussis Vaccination, **Committee Opinion #718**
- And more
Other ACOG Immunization Resources

ImmunizationforWomen.org website

- Clinical guidance
- ACOG app with Immunization applet
- Toolkits & FAQs
- Coding and reimbursement resources
- Practice management resources
- Vaccine safety resources
Contact the ACOG Immunization Department

Immunization@acog.org
Questions?
Announcements: New Resources in Toolkit

• **DHCS Learning Collaborative February 2019 Presentation**: Protecting Infants from Pertussis: Strategies to Increase Maternal Immunization & Reduce the Gaps in Health Systems.

• **Medi-Cal Transportation Benefit Poster**

• **ACOG Tools**

• **Infographic from the California Immunization Coalition**
Announcements: New Resources for WIC

Presentation for WIC Staff by Dr. Elizabeth Rosenblum
https://www.youtube.com/watch?v=DeMDb8bFG44&feature=youtu.be

I’m Pregnant Magazine now includes prenatal immunization information (Not in toolkit)
See you at the CIC Summit!

Please Join Us for the 2019 California Immunization Coalition Summit!

2019
California Immunization Coalition Summit | IZ Coordinators’ Working Meeting

RIVERSIDE, CA
APRIL 8-10, 2019

Today’s Vision: Tomorrow’s Reality

April 8th and 9th, 2019 in Riverside, CA

http://www.immunizeca.org/summit-2019
Thank you!

Prenatal Tdap Toolkit: http://eziz.org/resources/pertussis-promo-materials/prenatal-tdap
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