Improving Childhood Immunization Rates in Maine: Joining Forces for Success

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Objectives

Participants will be able to:

1. Discuss Maine’s current childhood immunization data landscape.

2. Describe challenges and opportunities to increase Maine’s childhood immunization rates.

3. Identify actionable strategies to increase childhood immunizations in their organizations.

“First, I want to give you an overview of what I will tell you over and over again during the entire presentation.”
Maine: Vacationland
“The Way Life Should Be”

8th Healthiest State in the Nation (2011 America’s Health Rankings)
Not-for-profit, integrated family of healthcare organizations
Community hospitals, physician practices, long-term care facilities, home care agencies, and support services in Maine’s southern, central, mid-coast, and western regions
Serve 11 of Maine’s 16 counties (75% of the state’s population)
Ranked #67 among the nation's top 100 integrated delivery networks (‘11)
Dedicated to concepts of Triple Aim: improve population health, reduce per capita cost of care and enhance the patient experience
Focus on improvement in community health, clinical care, patient safety, education, healthcare policy and research

MaineHealth Vision:
Working together so our communities are the healthiest in America
Members:
• Maine Medical Center
• Lincoln County Healthcare:
  - Miles Memorial Hospital
  - St. Andrews Hospital
• Western Maine Health
• Pen Bay Healthcare
• Southern Maine Medical Center
• Waldo County Healthcare
• Spring Harbor Hospital/Maine Mental Health Partners
• HomeHealth Visiting Nurses
• NorDx
• Maine Physician Hospital Org
• Synernet

Affiliates:
• MaineGeneral Health
• Mid Coast Health Services
• St. Mary’s Regional Medical Center
• New England Rehab Hospital
ME was 36th in nation for childhood immunizations in 2011

**Five Vaccines** include Diptheria-Tetanus-Pertussis (4+doses), Polio (3+ doses), Measles-Mumps-Rubella (1 dose), Haemophilus Influenza B (3+ doses), and Hepatitis B (3+ doses)

**Seven Vaccines** include the five listed above plus Varicella (1+ doses) & Pneumococcal Conjugate Vaccine (4+ doses)
Baseline Rates for 14 MaineHealth Practices: % of 19-35 Month-olds Up-to-date with the Complete Series of Recommended Immunizations

MaineHealth Practices Using EPIC-EMR who had data for 25+ patients, 19-35 months old, in ImmPact2 registry, as of June 30, 2011 State rate, represented by the black bar is estimated from the 2010 National Immunization Survey.
Maine State Registry Data (Immpact2)
Distribution of Up-to-date Rates for 16 MaineHealth Practices

Blue Bar = Median Rate

% Total UTD  DTP/DbP4  Polio 3  MMR 1  Hib 3  HepB 3  Varicella 1  Pneumococcal 4
The “Perfect Storm”
Why Focus on Immunizations Now?

Past: General interest among clinicians, public health and others, but little coordinated leadership or action.

Now: A perfect storm of:
- Accountable Care
- Meaningful Use
- Patient Centered Medical Home
- Improving Health Outcomes for Children
- Maine Universal Childhood Immunization Program
- Quality Improvement Initiatives (focus on pediatrics)
- MaineHealth Health Index Initiative
The Players

- Healthcare Systems
- Professional Organizations
- Government/Policy
- Universities
- Public Health
- Statewide Quality Improvement Organizations
- IS/IT groups
- Partnerships/Coalitions
The MaineHealth Story

- MaineHealth Health Index
- Childhood Immunizations = 1 of top 6 health improvement priorities; significant resources allocated
- Formation of MaineHealth Childhood Immunizations Task Force
- Strategic plan created using multi-sector approach to improvement (clinical, community, policy arenas)
- Ultimate goal = increase the state’s childhood immunization rate to the highest in New England by 2016
Challenges and Opportunities

• **Challenges**
  – Unfavorable parental attitudes
  – Data accuracy and accessibility
  – Workflow strain on ambulatory practices (time!)

• **Opportunities**
  – Focus on pediatric healthcare quality improvement; aligning measures/data collection
  – Documented best practices
  – Coordinated patient education/outreach
  – Health Information Systems – integration with ImmPact2
  – Universal Childhood Immunization Program
Maine’s Universal Childhood Immunization Program

• Signed into law April 2010; functional in January 2012
• Provide all children from birth - 19 yrs with universal access to a uniform set of vaccines as determined and updated by the Maine Vaccine Board (providers, insurers, pharma industry, employers and public health)
• Unique funding strategy – pmpm assessment on all payers based on CDC formulary and # of covered children
• Based on New Hampshire and Washington’s programs
First STEPS Learning Initiative: **Raising Immunization Rates**

- Nine-month modified IHI-style collaborative
- Included monthly coaching calls, data collection, learning sessions
- 24 clinical teams – 2 inpatient, 22 outpatient
- Monthly PDSA Cycles:
  - Reminder/Recall (R/R)
  - Tracking Refusals
  - Moved or Gone Elsewhere (MOGE)
  - Data Entry/Reconciliation
  - Hep B documentation
  - Missed opportunities (acute visits)
  - Standing orders
  - HPV reminders
  - Patient education materials
  - Provider education
  - Immunization record review/Point of Care Reminder for physician
Strategies for Change

Employing a multi-sector approach to improvement, MaineHealth and its partners created a strategic plan to achieve outcomes in clinical, community and policy arenas.

Clinical
- Increasing use of Maine’s Immunization Information System (IIS - ImmPact2) on a per-patient basis
- Testing best practice workflow and clinical quality improvement strategies in ambulatory and hospital-based practices through Improving Health Outcomes (IHOC) for Children’s First STEPS pediatric immunization collaborative
- Procured grant funding to create and test a web-based toolkit for point of care family education by nurses and medical assistants

Community
- Pilot testing family educational resources
- Obtained grant resources to develop an actionable strategic plan to provide immunizations in non-traditional settings
- Creating a comprehensive social marketing campaign promoting vaccination safety and necessity
- Developing a process to discuss vaccination information during the prenatal period

Policy
- As part of the Maine Immunization Coalition, achieved successful passage of Maine’s Universal Childhood Immunization Law and trained over 225 practices in its implementation
- Formation of MaineHealth Childhood Immunizations Task Force to gain consensus on priority strategies and action plans
- Opposition of bills requiring the disclosure of vaccine ingredients to parents and the prohibition of mandatory vaccination

The Goal

Increase Maine’s childhood immunization rate to the highest in New England by 2016
Lessons from Maine

1. Value of Health System prioritizing childhood immunizations
   - Physician Engagement
   - Infusion of Resources
   - Expanded Partnerships

2. Policy – Universal Childhood Immunization Law

3. Accurate data collection and reporting is essential to measuring success.

4. Seek Grant Funding
   - Critical in developing and trialing innovative pilot programs.
   - If implementation grants are not available, planning grants can be used to expand upon promising ideas.
Lessons from Maine

1. Strike with information while the iron is hot.
   - Popular discussion topic among parent groups, providers, clinicians and other community groups
   - Social marketing, patient education, advocacy

2. Pool resources and collaborate on quality improvement initiatives.
   - Shared goals and vision
   - First STEPS Collaborative
   - Quality Improvement Coaching
   - Encourage innovation at the practice-level while maintaining a certain level of standardization across groups (top-down, bottom-up approach)
Contact Information

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Other Resources:
• ME Vaccine Board (www.mevaccine.org)
• First STEPS Learning Initiative (http://www.mainequalitycounts.org/major-programs/ihoc-quality-counts-for-kids.html)
• MaineHealth Health Index Reports are available at: (www.mainehealth.org)