

# **Developing Sustainable Partnerships Between State Health Departments and Ob-gyn Practices: Lessons Learned**

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# Overview of Presentation

- Background Information
- Developing Partnerships in ACOG District V
- Lessons Learned from Partnership Building
- Moving Forward to Expand Lessons Learned

# About the American College of Obstetricians and Gynecologists (The College)

- The College represents over 56,000 members, representing over 95% of board certified obstetrician-gynecologists.
- CDC's adult and adolescent immunization schedules are given to the College annually for review and endorsement.
- Fellows are strongly encouraged to recommend and to offer immunizations within hospitals and office based practices.

# Opportunities for Partnership

- Many women see their ob-gyn as their primary care provider, reinforcing the need to receive immunizations from their ob-gyn. Ob-gyns indicate that they would like their practices to have additional education and local resources they could contact on immunization.
- State Health Department (SHD) Immunization Programs are developing programs to reach adolescents and adults; SHDs are creating and expanding resources to reach adolescent and adult providers.

# Project Goals

- To create and expand ob-gyn office-based immunization programs in ACOG District V (IN, KY, OH, MI)
- To increase the types and doses of immunizations given in ob-gyn practices
- To build sustainable partnerships between each ob-gyn office and its respective state health department (SHD) immunization program

# Benefits of Partnership to Ob-gyn Practices

- Provides ob-gyn practices with a state contact
- Offers comprehensive immunization trainings for staff
- Assists practices in Vaccine for Children (VFC) program enrollment
- Encourages practices to participate in state immunization registry (Ohio, Indiana, Michigan)

# Project Methodology

- Recruited total of 60 ob-gyn practices, 15 selected from each state (IN, KY, MI, OH)
- Each practice received a one hour on-site training, given by the SHD and College program staff
- Each practice received a set of core immunization materials; materials jointly developed by SHD and program staff
- Each practice received contact information for SHD Immunization Program staff

# Tracking Project Impact

- Prior to training, a pre-test was administered to the sixty practices to assess current immunization practice
- Three months following pre-test, a post-test was administered to see to what extent practices made improvements to their office -based immunization programs

# Training Materials

SHD and College staff selected the following materials for onsite trainings

- Temperature Logs
- Do Not Unplug! Signs
- Immunization Schedules for Adults, Adolescents and the adolescent catch-up schedule
- Vaccine Administration
- Handouts on Proper Vaccine Storage and Handling
- Vaccine Information Statements (and why they must be given)
- Standing Orders
- Laminated Coding Card
- College Committee Opinions concerning vaccination including CO 468 Influenza Vaccination During Pregnancy
- Vaccines for Children (VFC) information, including enrollment forms
- CDC Vaccine Price List with ordering contact information

# Additional Immunization Resource



[www.immunizationforwomen.org](http://www.immunizationforwomen.org)

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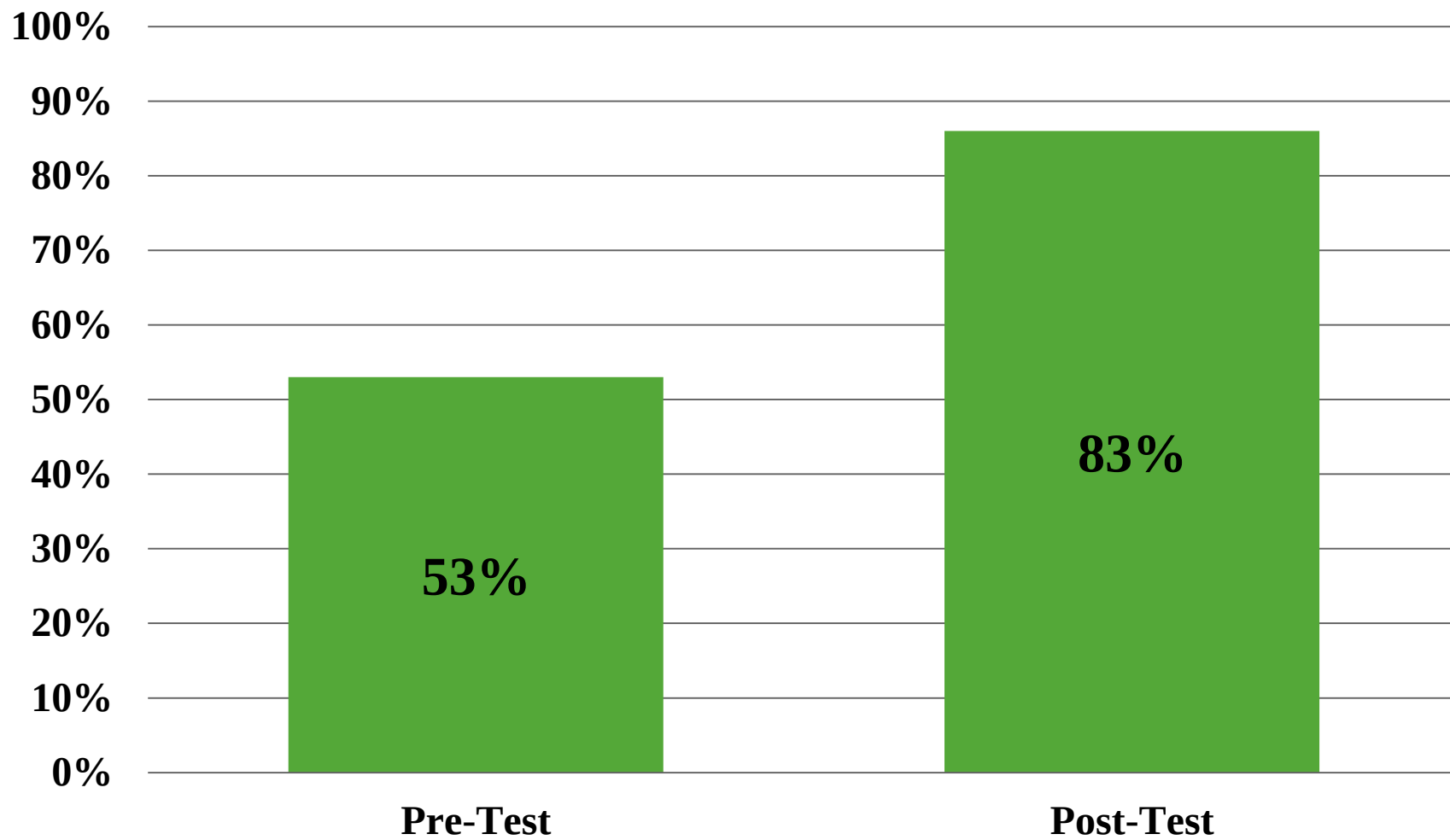


# Results from Post-Test

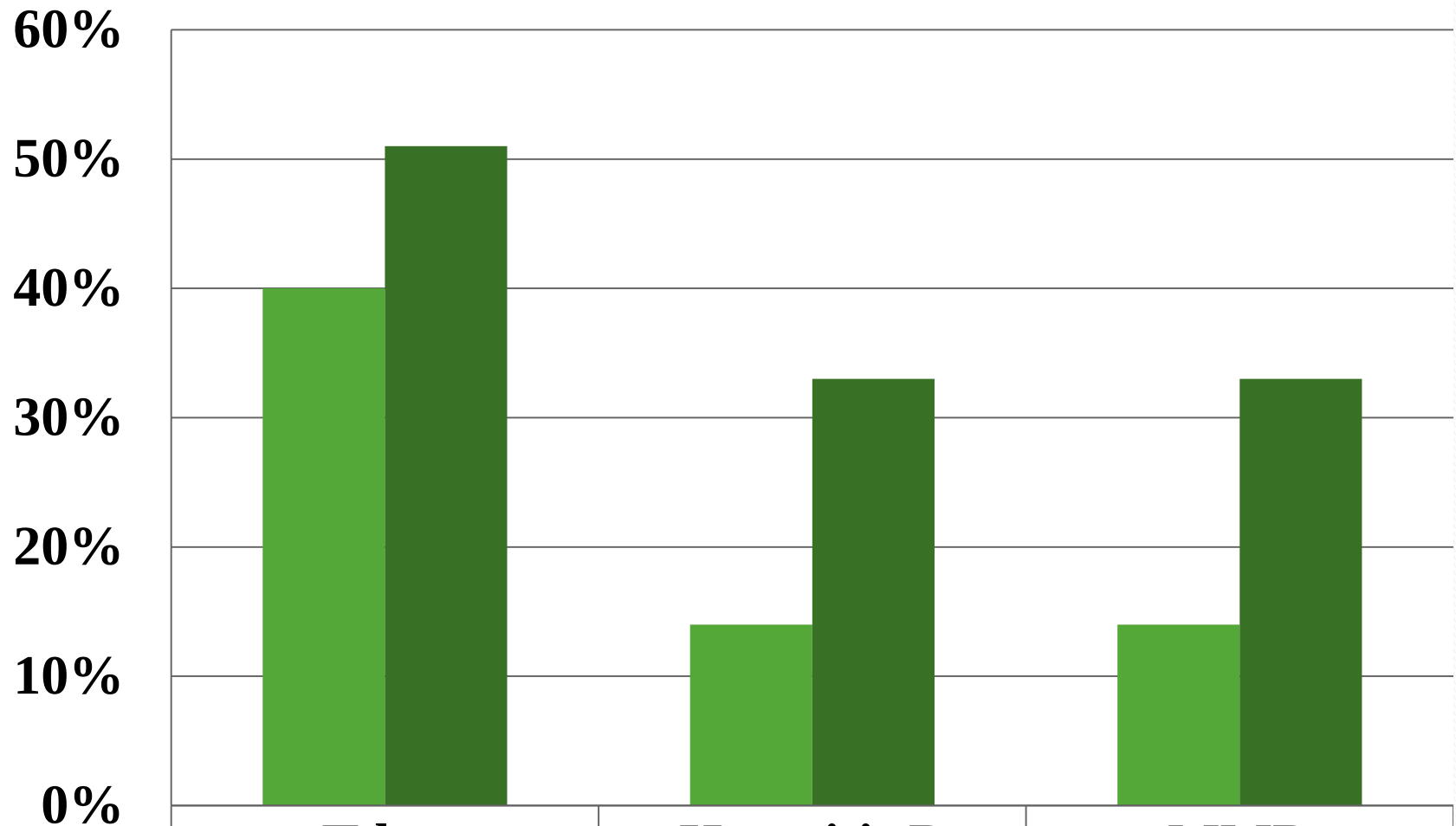
97% of participants responded to the post-test survey

- 29% of practices report they have increased vaccine doses from their pre-test rate.
- 48% of practices from IN, MI and OH are now participating in the state immunization registry; an additional 12% are interested in enrolling.
- 83% report they now have the name of a SHD contact person they can reach with questions about immunizations, an increase from 48% at the time of the pre-test.

# Percent of Practices with an Immunization Coordinator



# Increases in Type of Immunization



|             |     |     |     |
|-------------|-----|-----|-----|
| ■ Pre-Test  | 40% | 14% | 14% |
| ■ Post-Test | 51% | 33% | 33% |

# Lessons Learned: Need for Endorsements

- It was important for ob-gyn practices to know that College national and district leadership supports immunizations; this motivated practice sites to model what the College was promoting.
- It was beneficial that the ob-gyn encouraged all practice staff to attend the training.

# Lessons Learned: Importance of Practices Designating an Immunization Coordinator

- It was important for the practices to designate an immunization coordinator who would be the immunization point person for the practice.
- This person would also serve as a contact for SHD staff for follow-up trainings.

# **Lessons Learned: Ob-gyn Practices want state-specific immunization data**

- Providing ob-gyn practices with state-specific immunization data helped motivate staff to discuss immunization with patients.

# Benefits to SHDs and Ob-gyns of Continued Collaboration

- As immunization programs for adolescent and adult women continue to evolve, it is important for SHDs and the College to work together to effectively reach ob-gyn practices with up-to-date immunization information.
- Ob-gyn practices report that these trainings were beneficial and encouraged staff to promote immunizations within their practices.

# Expanding Partnerships

- The College sent a 9 piece mailing to over 33,000 ob-gyns in active practice, encouraging Tdap Vaccination. These materials include a physician script, patient FAQs on Tdap Vaccination and patient FAQs on Vaccine Safety
- The College hopes to continue to create additional partnerships with SHD immunization programs and coalitions.

# Conclusion

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- Michigan Department of Community Health
- Ohio Health Department

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