

## HOW TO MAXIMIZE A VACCINATION COMPLIANCE PROGRAM

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## **EDUCATIONAL SOLUTIONS...**

> A variety of demands on clinicians precludes them from providing adequate preventative health education.

Parents and responsible adults have been bombarded with anti-immunization information, reports, and advertising. Parents are confused, scared, and uncertain what to do?

> Community Health Centers (CHC) or equivalents collaborate with community Social Services Agencies (SSA).

> CHC will provide comprehensive general clinical immunization training to designated SSA staff.

> CHC will establish phone hotlines with access to licensed clinicians highly experienced in pediatric care, to answer more complex clinical questions and concerns.

SSA will conduct educational outreach, promoting preventative healthcare compliance with CDC recommended vaccination schedules for 0-18 year olds.

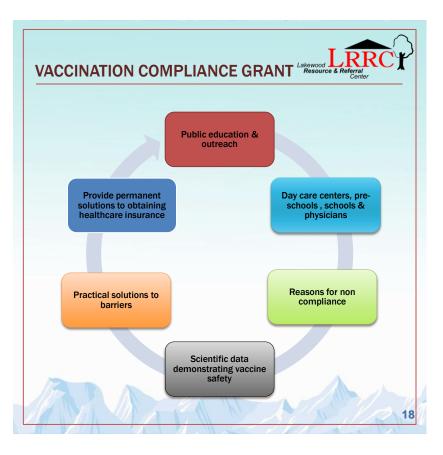
SSA will collect and process vaccination compliance information from phone calls, surveys, and state immunization registry records.

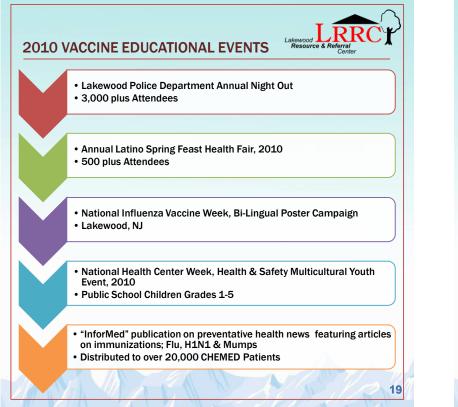
SSA will document reasons for non-compliance and track patterns that will then allow for the development of solutions to ameliorate the barriers to compliance.

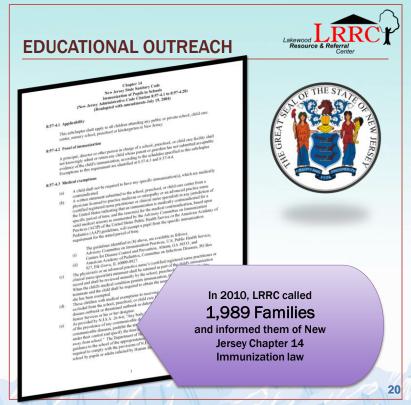
SSA and CHC will strive to work with others in the community, such as private physicians and health departments, to create educational outreach events, promoting immunization compliance.











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 $\checkmark {\sf LRRC}$  developed a custom software application for the CDC

project

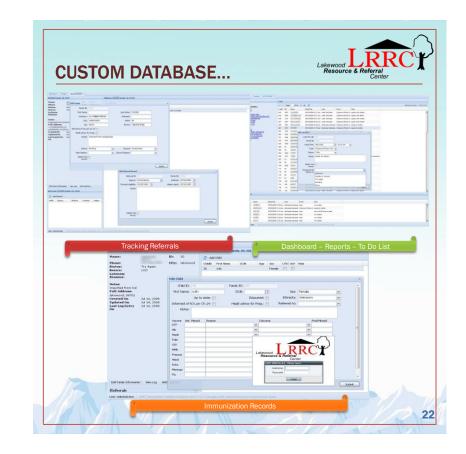
✓ Secure, web-based access to data

#### ✓ Keeps track of:

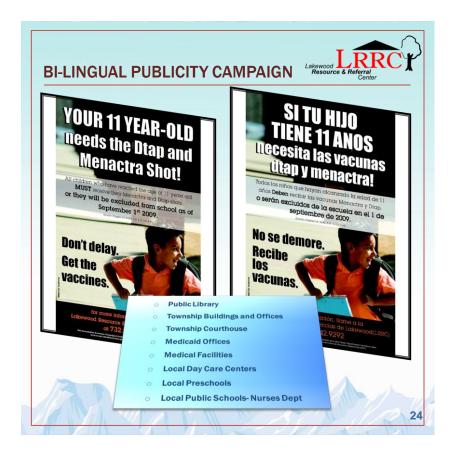
- ➤ Families & children
- Missing vaccinations
- > Complete log of our outreach efforts
- ➤ Reasons for non-compliance
- ➢ Pertinent Demographic Information

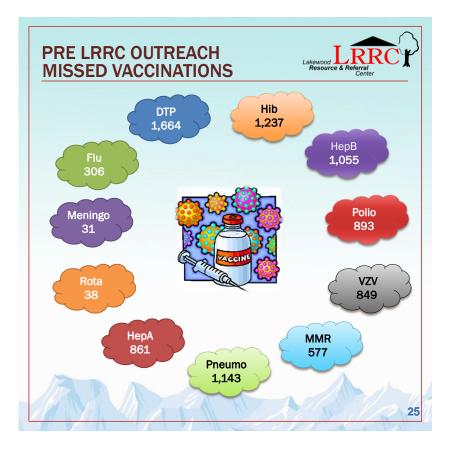
✓ Facilitates compliance with the CDC grant requirements

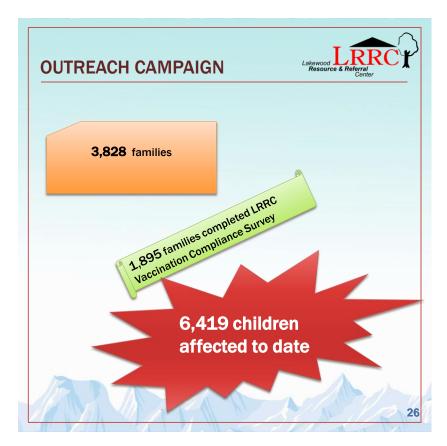
- ✓ Complete Reporting Capabilities
- Potential to integrate database with NJIIS

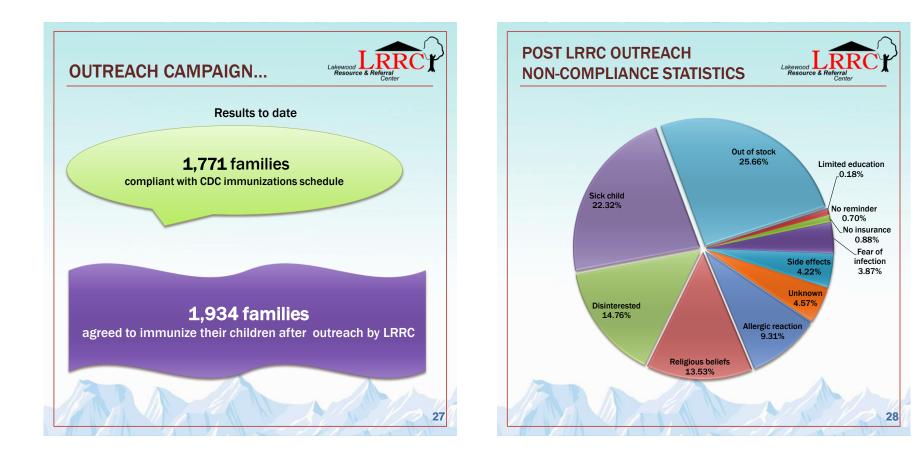


l) entra en efecto y r	equiere que todos los niños	en: centros de cui	, la nueva ley NJAC 8:574 (capítulo lado, preescolar, y escuelas, a	effect and requires	Please be advised as of September 1, 2008 the new law NJAC 8:57-4 (Chapter 14) goes into effect and requires all children attending child care centers, preschools, and schools to				
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ombre legal del padre;_									
	Ciudad								
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is el proveedor de servi	cios de salud de su hijo/hijos u	in participante en el ?	UIIS? 🗆 Si 🗆 No 🗆 No estoy seguro						
	particular que tu estás frenand			Is your child up to dat	te in his/her vaccines?  Yes	io ⊡Not sure			
iay argunas vacunas cir	pancuar que n esas netano	io de dai a su mino? E	311190	Are there any particul	lar vaccines that you are holding	back from giving t	o your child?□Y	rs ⊡No	
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hat is your main reason Juál es su razón princip	i for late vaccinations? al de los vacunaciónes tarde?			What is upper main re-	ason for late vaccinations?				
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r favor explique				please explain:					
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	ión sobre NJAC 8:57-4 (Capita		nación		rmation on NJAC 8:57-4 (Chapt		on laws		
	vacunas a precios reducidos	s			significantly reduced cost vacci	165			
	para un seguro de salud			C Ombifyin	g for health insurance				









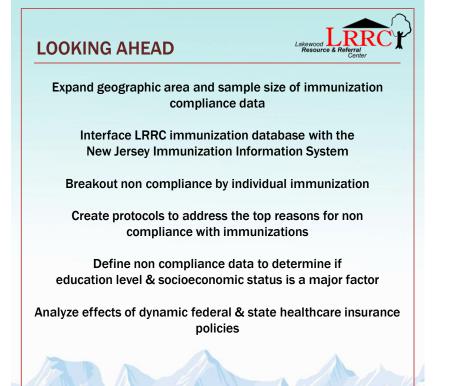
# **IMPLEMENTED SOLUTIONS**



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✓ Developed & regularly updates list of low cost/free vaccination providers

- Referred parents/guardians to LRRC social services case management staff to evaluate eligibility for permanent healthcare coverage
- CHEMED FQHC hosts flu/H1N1 clinics
- LRRC in conjunction with Ocean County Health Dept. hosts Flu/H1N1 clinics
- LRRC expanded non-compliance survey to include educational & socioeconomic information
- ✓ LRRC Social Services staff provided education & answered questions
- CHEMED Nursing Staff provided technical medical information & answered questions



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