Using a Standardized Procedure to Enhance the Effectiveness/Outcome of AFIX Site Visits and Improve Provider Service Delivery

## Terri Nickerson Maine Immunization Program

Maine Center for Disease Control and Prevention

An Office of the Department of Health and Human Services





Mary C. Mayhew, Commissioner



# Background

Prior to 2010, the Maine Immunization Program (MIP) had no standardized procedure on how to conduct feedback during AFIX site visits

- MIP staff <u>verbally</u> identified to providers areas to be improved
- MIP did not track if providers were successful in implementing the suggestions
- MIP did not analyze the level of provider satisfaction regarding AFIX process



Lack of a standardized AFIX feedback procedure resulted in:

- No written feedback documentation provided
- No structured guidance provided to practices interested in implementing action steps to address areas of improvement
- The effectiveness of the AFIX process was not analyzed

# **Objectives**

- Revise AFIX site visit procedures
- Develop documentation of AFIX feedback
- Provide follow-up within six months of AFIX visit

# **Revise AFIX site visit procedures**

- Provide training to AFIX staff that includes:
  - Reviewing immunization assessment reports
  - Identifying steps practices could implement to enhance immunization delivery
  - Developing a Quality Improvement (QI) Workplan

## **Documentation** of AFIX Feedback - 1

Complete a Quality Improvement (QI) Workplan template that includes the following key information:

- Defined action steps to improve immunization practices;
- Staff member(s) responsible for implementation of the QI plan;
- 3. Materials and/or training AFIX staff supplied to implement the improvement;

## **Documentation of AFIX Feedback - 2**

Complete a Quality Improvement (QI) Workplan template that includes the following key information:

- 4. Date(s) for reassessment and measurement of intervention effectiveness;
- 5. Follow-up to discuss the progress and/or outcome of the QI Workplan.

# **Provide QI Workplan Follow Up**

• Within six months of AFIX site visit, MIP staff follow up to discuss the progress and/or outcome of the QI Workplan

# Methods - 1

## Written QI Workplan\* developed during AFIX visit

## • Provider receives written copy of QI Workplan

\*Template of QI Workplan available as presentation handout

## Methods - 2

Post site visit, provider received a satisfaction survey\*

• Analyzed responses to evaluate the level of provider satisfaction with the AFIX process

Follow-up survey\* sent to providers asking for feedback related to their QI Workplans

• Analyzed responses to evaluate the quality and effectiveness of the QI Workplan process

\*Template of survey available as presentation handout

# **Site Visit Satisfaction Survey**

- Analyzed responses from the survey to identify the level of satisfaction Providers had with the AFIX process.
- Evaluation of site visit satisfaction survey responses showed majority of providers were satisfied with the AFIX process.

## **Results - Site Visit Satisfaction Survey-1**

Providers strongly agreed or agreed that:

• Feedback was:

- Constructive (99%)
- Timely (92%)
- Staff knowledgeable (96%)
- Staff courteous and professional (98%)

## **Results - Site Visit Satisfaction Survey -2**

## Providers strongly agreed or agreed that:

- Materials provided were useful (90%)
- Assessment reports were informative (87%)

Beneficial to participate in AFIX visit (83%)

# QI Workplan Survey\*

Used to obtain feedback from providers regarding:

- AFIX site visit process
- QI Workplan
- Level of success in implementing QI Workplan
- Barriers during implementation of QI Workplan
- Provider satisfaction regarding QI Workplan

\*Template of QI Workplan Survey available as presentation handout

During your AFIX site visit, what suggestions were made to address issues specific to your practice regarding immunization rates?

- Reviewing records to identify patients that have MOGED (Moved or Gone Elsewhere): 65.9%
- Following up with parents/guardians who missed scheduled appointments: **61.5**%
- Running Reminder/Recall: 59.3%

Of the suggestions made during your AFIX site visit, which were <u>easiest</u> to implement?

- Following up with parents/guardians whom miss scheduled appointments: 46.6%
- Reviewing records to identify patients that have MOGED (Moved or Gone Elsewhere): 43.2%
- Calling to remind parents/guardians of upcoming appointments: 40.9%

# Of the suggestions made, which were the most <u>difficult</u> to implement?

- Running Reminder/Recall: **31.9**%
- Following up with parents/guardians whom miss scheduled appointments: 26.1%
- Flagging charts to identify missing immunizations: 15.9% (tied)
- Reviewing records to identify MOGED patients: 15.9% (tied)

What do you feel has been the biggest barrier for your practice when trying to implement improvement strategies?

- Parent/guardian refusal to vaccine: 57.6%
- Missed appointments: **51.1%**
- Staff time: 44.6%

Do you feel that the outcome of this initiative has been worth the staff time/costs incurred?

- Yes: 56.5%
- Don't Know: **34.8%**
- No: 8.7%

How strongly do you agree that the action steps outlined in your QI Workplan has helped to improve your service delivery?

- Neutral: 39.1%
- Agree: <u>37.0</u>%
- Strongly Agree: 20.7%
- Disagree: 3.3%



#### Assessment of immunization rates

#### **Pre-Workplan**

Post-Workplan

6191

#assessed 4647

Up-to-date\* **49% 69%** 

\* **Up-to-date rates for: 4**DTaP **3**Polio **1**MMR **3**HIB **3**HepB **1**Var **4**PCV

## **RESULTS** –

## Pre-QI Workplan vs. Post-QI Workplan





#### QI Workplan vs. no QI Workplan

# Using a comparison group helped MIP address the question of whether this initiative is "making a difference."

Immunization rates of providers that had a 2010 QI Workplan developed were compared with immunization rates of providers that did not have a 2010 QI Workplan developed.



#### QI Workplan vs. no QI Workplan

- Providers who did develop a QI Workplan increased their rates by 41%\*
- Providers who did not develop a QI Workplan increased their rates by 19<sup>%</sup>\*

\*Up-to-date rates for 4DTaP 3Polio 1MMR 3HIB 3HepB 1Var 4PCV

#### **RESULTS**

#### QI Workplan vs. no QI Workplan



### **RESULTS** –

## QI Workplan vs. no QI Workplan



# Conclusions

Utilizing a standardized procedure for AFIX site visits increased MIP's ability to identify areas for improvement and jointly design with providers strategies to successfully address areas; resulting in strengthened service delivery.

## **Conclusions – Evaluation Results**

## Evaluation of this standardized procedure revealed a high degree of satisfaction with the new AFIX process.

# **Future MIP Efforts**

- Focus on promoting known successful strategies
- Identify ways to eliminate barriers
- Continue to utilize the AFIX QI Workplan

# Handouts\*

## • 2010 Quality Improvement (QI) Workplan

## • 2010 AFIX Site Visit Satisfaction Survey

## • 2010 AFIX Quality Improvement Workplan Survey

\*Handouts are available for download through the NIC Online Poster Presentation Link. Also available upon request to the author.

# **Additional Information**

An electronic copy of the full Quality Improvement evaluation report can be found at: <u>http://www.maine.gov/dhhs/boh/ddc/immunization</u> /<u>index.shtml</u> (under "Links of Interest" in right hand column).

Please feel free to contact the individual below if you would like more information regarding this project.

Terri Nickerson Maine Immunization Program 207-287-6988 <u>Terri.Nickerson@Maine.gov</u>