

LOCAL HEALTH DEPARTMENT NAME: Grant County Health District  
 ADDRESS: 1038 W. Ivy, Suite #1  
 PHONE NUMBER: (509) 766-7960, ext. 21  
 SIZE: 22 Employees  
 POPULATION SERVED: 87,700  
 PROJECT TITLE: Grant County Immunizations Quality Improvement Project

**PLAN**  
 Identify an opportunity and Plan for Improvement

**1. Getting Started**

As a result of the measles outbreak, increasing complete immunization status quickly became a priority. The index case was in a private school in Moses Lake, but public school children were impacted. It was decided that the best approach would start with school nurses. The private schools do not have the same requirements for school nurses, so approaching the public schools was the logical starting point.

**2. Assemble the Team**

The team started with the Personal Health Director, Immunizations Coordinator, and Health Educator. A few months later, with the start of the MLC3 training, the Assessment Coordinator and later the Nurse Program Facilitator were added to the project.

**3. Examine the Current Approach**

GCHD used a logic model to demonstrate details of the project. Baseline school data was collected.

**4. Identify Potential Solutions**

The planning assumption was that providing immunization clinics at the schools would increase immunization rates in this age group. Determining provider needs via a county-wide survey could supplement our knowledge. The survey achieved a 54% response rate. More than 65% of these providers indicated they were not confused about immunization schedules. More than 70% indicated that parents did not seem reluctant to immunize. Data needs were not addressed in the survey.

**5. Develop an Improvement Theory**

The shortcomings in complete immunization status for 6<sup>th</sup> graders did not have as much to do with lack of receiving vaccinations as it did with the data sources and some ease in exempting children from complete status. Two different data systems are used: the Moses Lake School District uses Skyward; the Grant County Health District uses Child Profile. Some records in Child Profile were not in the school system. Changing the way children can be easily exempted from immunizations and improving the way school and provider data systems are utilized would help to increase immunization rates. If we could improve data systems utilization in the schools and provider settings, immunization rates should improve.

**DO**  
 Test the Theory for Improvement

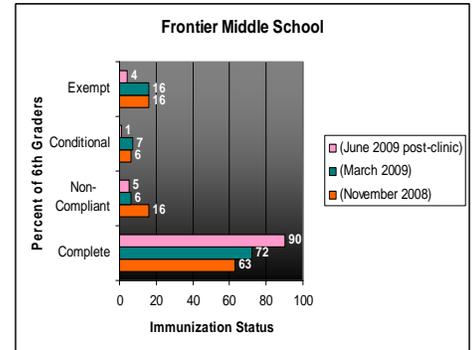
**6. Test the Theory**

One school, Frontier Middle School, made school required immunizations mandatory for their 6<sup>th</sup> grade registration process and achieved a high level of improvement. Provider education sessions were offered regarding data systems utilizations and identifying missed opportunities.

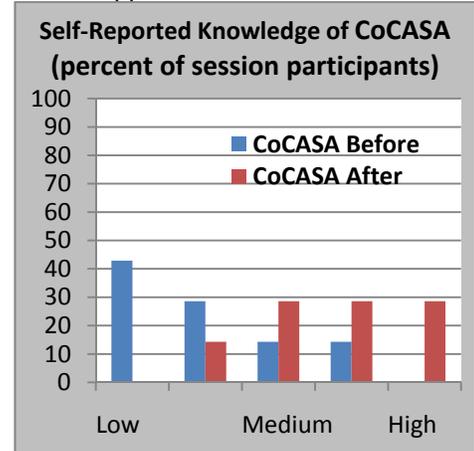
**STUDY**  
 Use Data to Study Results of the Test

**7. Study the Results**

The school intervention increased immunization rates in 6<sup>th</sup> graders from 72% to 80%. This was different cohort but same school and grade level.



Provider education sessions improved knowledge of CoCASA and 29% increased their knowledge about missed opportunities.



**ACT**  
 Standardize the Improvement and Establish Future Plans

**8. Standardize the Improvement or Develop New Theory**

Continued work with school staff regarding exemption system change and use of Child Profile. Increase providers use of data systems through awareness and education.

**9. Establish Future Plans**

Twice yearly follow-up with schools regarding Child Profile utilization and exemption policy changes

Follow-up on CoCASA utilization and provide updated CoCASA facility report cards once yearly.