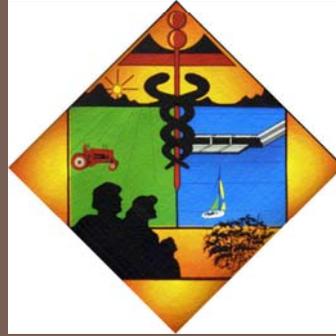


GRANT COUNTY HEALTH DISTRICT



Grant County Health District Staff

Personal Health	11
Environmental Health	5
Administrative and Clerical	10

Grant County 2009 Population Estimate	86,100
Public School Districts	10
Incorporated Cities and Towns	14
Hospitals	4

Team Members



- **Peggy Grigg:** Administrator/Personal Health Director
 - Role: Team Leader
- **Joy Reese:** Assessment/Emergency Response Coordinator
 - Role: Data, planning, documentation
- **Theresa Fuller:** Health Educator/Public Information Officer
 - Role: Education and Promotion
- **Belia McPartland:** Immunization Coordinator/Public Health Nurse
 - Role: Education and Provider Liaison
- **Carol Schimke:** Public Health Nurse/Nurse Program Facilitator
 - Role: Planning / Supervision of Clinic Operations
- **Jaclyn Rodriguez:** Student Intern

Setting Up the QI Project

- **Trigger Event: Measles Outbreak in Grant County**
 - Increasing immunization rates was a prioritized project, based on measles outbreak experiences
 - 18 of the 19 measles cases were unvaccinated, including the index case
 - Facilitated discussions with school nurses was the primary tool to identify and focus on school approach



AIM Statement



Step 1: What are we trying to accomplish?

Grant County Health District in partnership with school staff will increase the percentage of 6th grade complete vaccination for Chief Moses Middle School from 78% to 85% and Frontier Middle School from 63% to 69% for rapid cycle improvement which will also be addressed with next year's sixth graders using the November 2009 reports. The increase will be completed by conducting immunization clinics and measuring the impact based on data in the school reports, and conducting presentations and measuring the impact through percentage of attendance and effectiveness through evaluation surveys.

AIM Statement

Step 2: How will we know that a change is an improvement?

Short-term (Spring 2009)

1. Increasing percentage of current 6th graders with complete immunization status.
2. Increased percentage of current 6th graders with improved immunization status through utilization of school-based clinics.
3. Reduce the percentage of current 6th graders in non-compliant status.
4. Conduct educational presentations to providers and measure the percentage of providers we are able to reach.



Step 2 continued . . .

Medium-term (Nov. 2009 using WA State School Assessment Data)

1. Increasing percentage of 6th graders who are fully vaccinated based on school-required vaccines.
2. Increased percentage of 6th graders with improved immunization status through utilization of school-based clinics.
3. Reduce the percentage of 6th graders in non-compliant status.

Long-term (2010+)

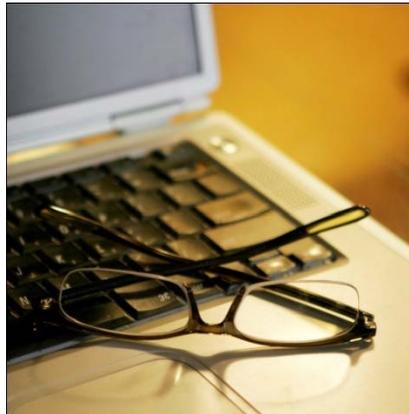
1. Higher overall immunization rates among 6th graders in Grant County.
2. Increased immunization partnership activity with school nurses and school reporting.

What changes can we make to create the improvement?

- Conduct immunization clinics during school registration process
- Improve partnership with school nurses by inviting them to QI Project meetings and requesting and sharing data
- Assess provider knowledge / barriers and cater provider education visits based on survey results
- Increase public awareness through Back to School Public Service Announcements

Analyze the causes

- Improperly documented data
 - ▣ Discovery of additional data was made through review of Child Profile; 31 additional children had complete immunization status at time of 1st clinic



Analyze the causes



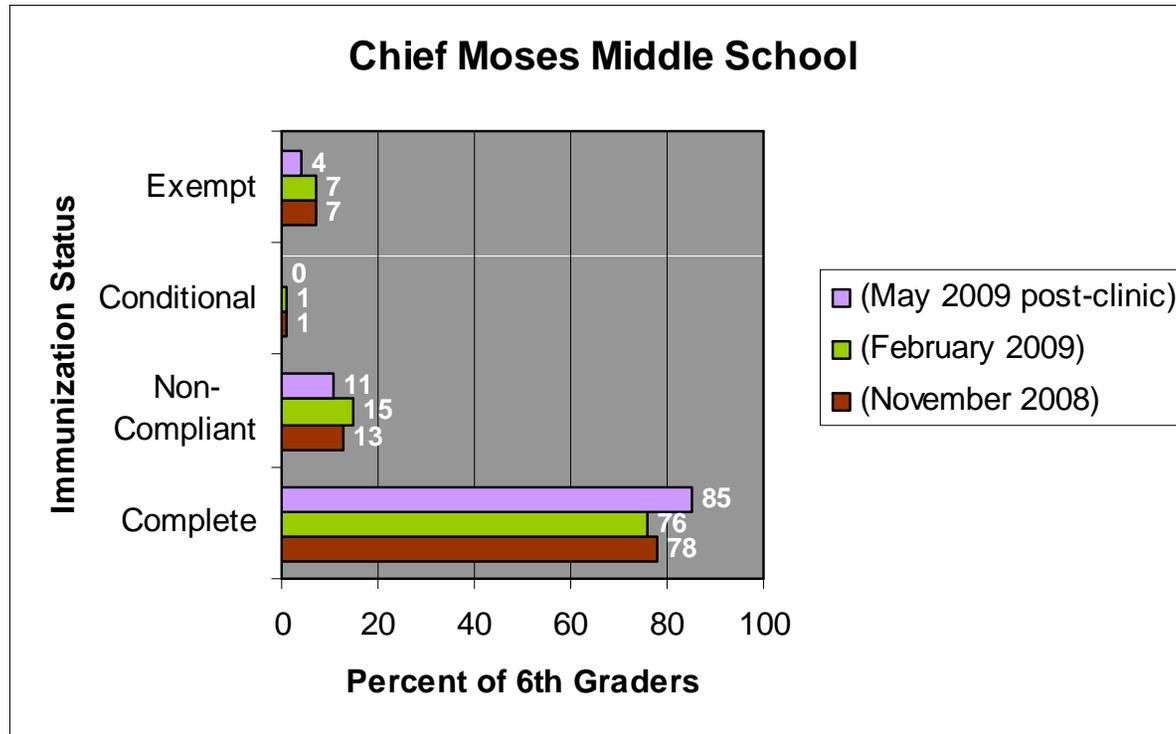
Provider Survey:

- ▣ Survey Monkey and Hard Copy Survey (baseline collected end of July 2009)
- ▣ Qualitative information - among the providers who feel there are too many barriers:
 - ▣ Most common theme was a lack of education (for both parents and providers)
 - ▣ Next most common theme was misinformation (culture myths, fear)

Immunization Project Logic Model

Plan		Do	Study	Act
Inputs	Activities	Outputs	Outcomes	Impact
<p>Schools: Nurses, Secretaries, Administration</p> <p>Public Health: QI Team meets to address project planning.</p> <p>Providers: Immunization Contacts</p> <p>Data: School Reports CHILD Profile Other sources as needed</p>	<p>Schools / Public Health: Buy-In Meetings</p> <p>ESD: Commits to raising administration awareness of immunization priority</p> <p>Data: Collect and review current data provided by school nurses/ secretaries</p>	<p>Spring 2009 Clinic: Partnership between public health and the two priority focus schools.</p> <p>Schools: Letter to parents with content provided by Health District.</p> <p>Survey providers: Baseline knowledge and immunization barriers.</p>	<p>Data: Collect post clinic data</p> <p>Survey: Tabulate baseline survey data.</p> <p>Public Information: PSA's on radio and adds in local newspaper about immunizations.</p> <p>AIM Statement Outcomes: All to date</p>	<p>Increased partnership activity (public health and school nurses).</p> <p>Increased school reporting activity.</p> <p>Higher imm. rates among 6th graders.</p> <p>Reduced incidence of vacc. preventable disease.</p> <p>Decreased imm. Status disparities b/w the schools.</p> <p>Improved quality of service</p>

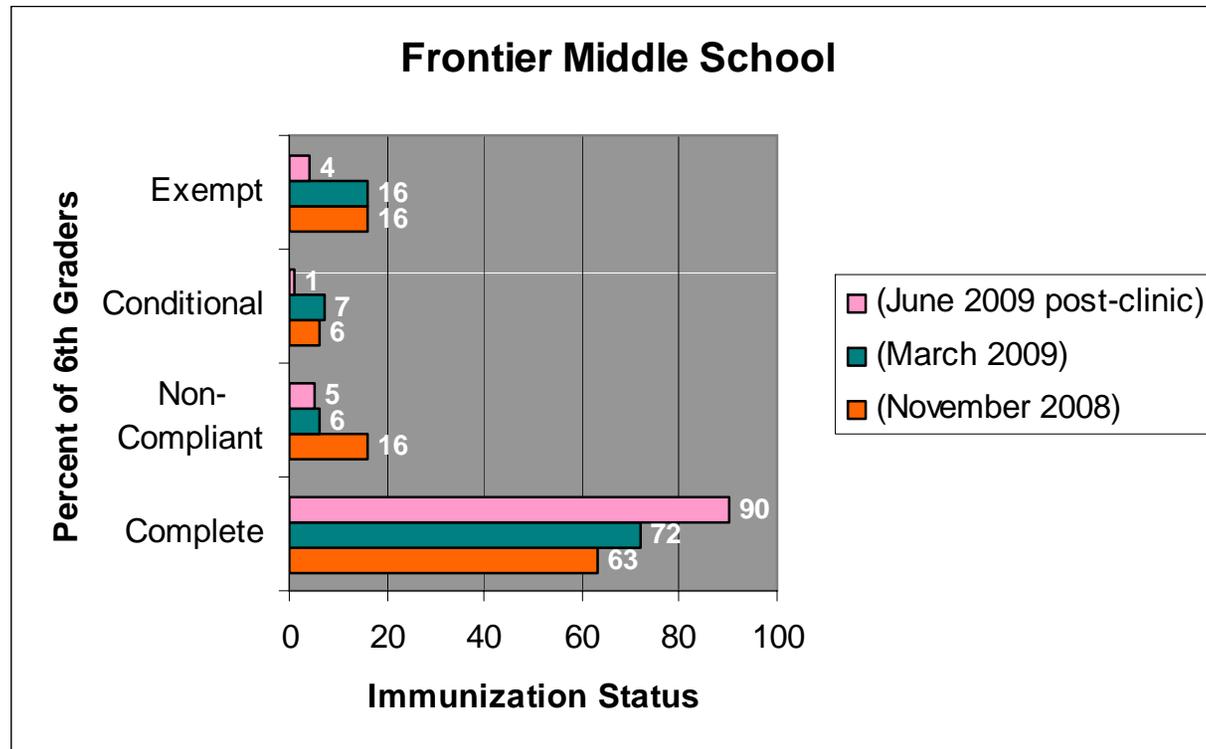
Results



Pre-clinic Complete = 78%

Post-clinic Complete = 85%

Results



Pre-clinic Complete = 63%

Post-clinic Complete = 90%

Lessons Learned



What Worked Well?

- ❑ Multi-disciplinary team functioned well. Aspects covered included nursing, immunizations, public information, data collection.
- ❑ School nurses now call us with more information like increased level of illness in schools. They also went through immunization records without us having to ask.

What Did Not Work Well?

- ❑ Engagement of school administrators did not occur as planned via the ESD

Next Steps



- Post-provider education follow-up survey
- Post-registration clinic data collection and analysis
- Continued communication with school nurses about school required immunizations.
- Engagement of school administrators.
- Promotion of CHLD Profile for immunization tracking related to documentation of immunization status for students. (It is not perfect, but is helpful in identifying actual immunization status).