

Education improves vaccination rates in adolescents

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Goals

- 1) Average vaccination rate of 70% for all adolescent vaccines at Alvernon Family Medicine Center
- 2) Establish clinic immunization workflows
- 3) Enhance inter-professional training and team building to further increase understanding of the importance of adolescent immunizations and population specific barriers.
- 4) Increase residents' knowledge of and experience in developing data-driven, patient-centered quality improvement initiatives.
- 5) Increase the percentage of adolescents who receive influenza, Tdap, Td/Tdap Booster, HPV, MenACWY and MenACWY Booster vaccines.

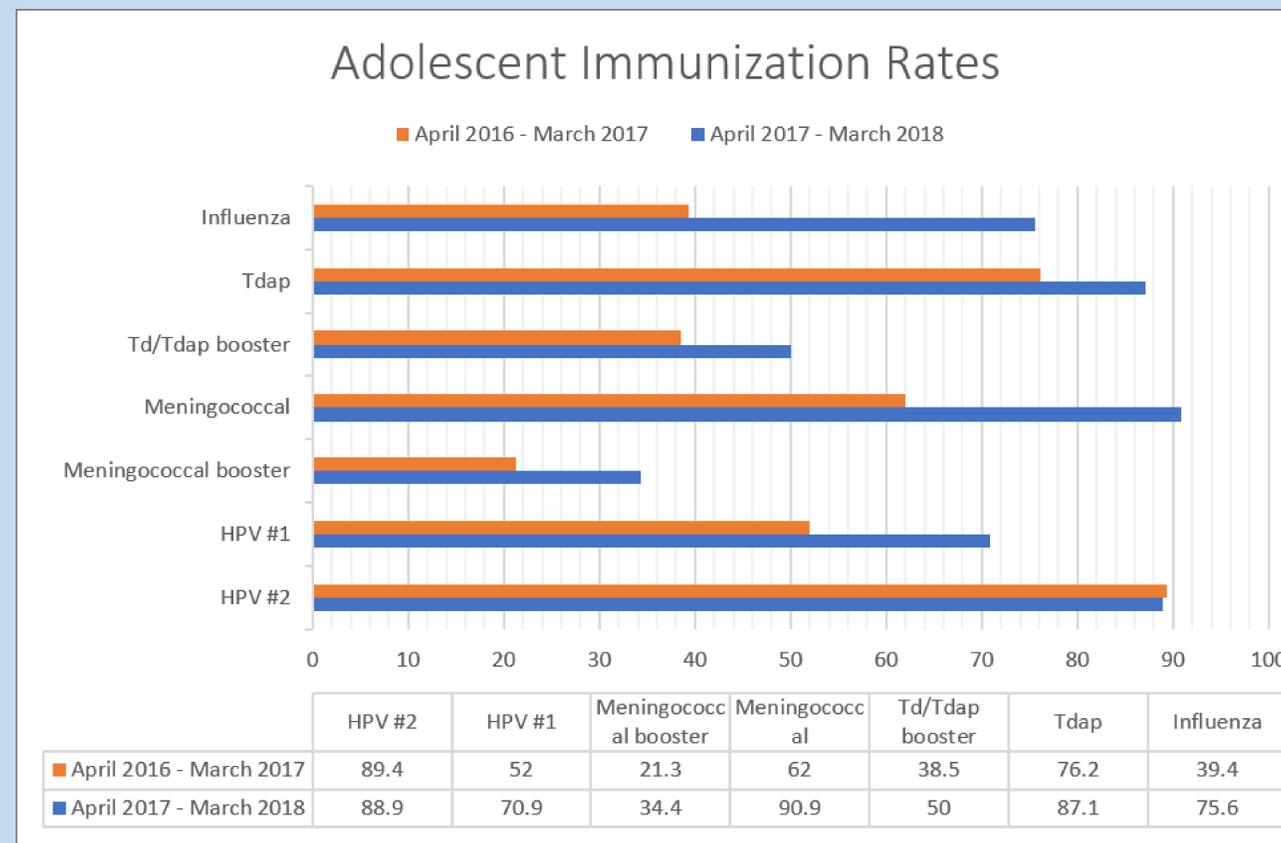
Setting

The Alvernon Family Medicine Center (FMC) is a residency-based clinic that serves a racially, ethnically, and linguistically diverse patient population. The clinic, located in Tucson, Arizona, near the US-Mexico border, provides care for Hispanic/Latino individuals and families which make up nearly 27% of the current patient population and make up 28.09% of the total patient visits in 2016. Alvernon FMC also cares for a large population of newly arrived and resettled refugees, which make up nearly a quarter of the total patient visits in 2016. Patients indicated more than 34 preferred languages (e.g., Spanish, Arabic, Nepali and Somali) other than English. In the 2015-2016 annual year, 47.40% of Alvernon's patients were enrolled in the Arizona Health Care Cost Containment System (AHCCCS), the Arizona Medicaid Program. These low-income families account for a significant proportion the clinic's patients.

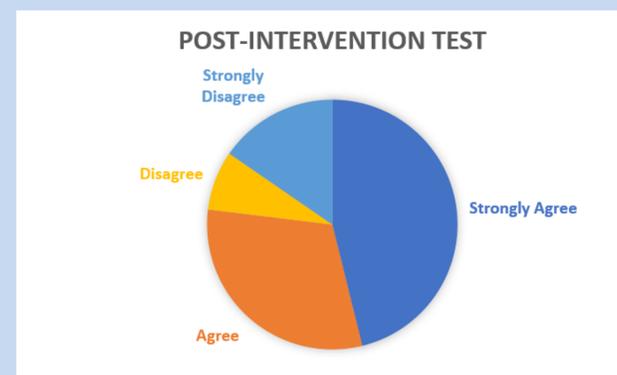
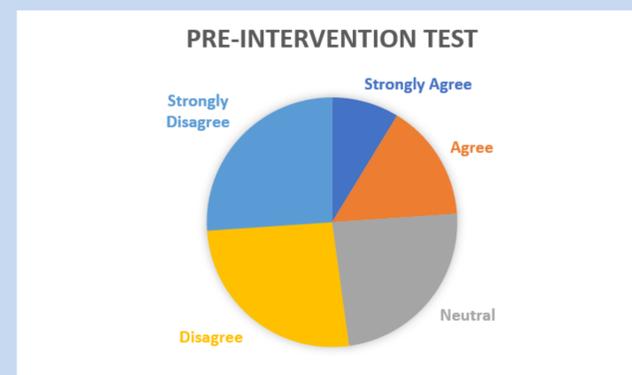
Methods

- Single site, residency teaching clinic, non-blinded, non-randomized
- Pre & Post Intervention Assessments
- Interventions:
 - 3-4 minute Q&A sessions, as clinical scenarios
 - 2-3 minute video presentations
- Participants:
 - MD, DO (residents and attendings)
 - Clinical Staff: MA, LPN, RN, Clerical support staff

Results



"I am confident about what immunizations are due for my patients ages 11-21."



Acknowledgments

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Best Practices

- Chart review prior to visits to identify patients eligible for vaccinations
- Strong recommendations for vaccines from clinical support staff to physicians
- Education promoting standardized language used to address patient questions and concerns to ensure consistent messaging

Barriers

- EHR transition interfered with data collection and retrieval
- High staff turnover
- Small sample (pre-/post-assessments)

Next Steps

- Continue to improve immunization workflows through PDSA cycles
- Re-introduce project when interns start each year
- Focus on meningococcal booster, which is not required by schools

