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PLAN

Improve Immunization record keeping of WIC clients

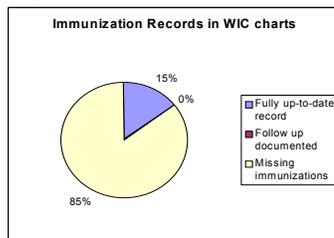
Area for Improvement

It is our responsibility as WIC certifiers to ensure that our WIC children are either already or on their way to being, up to date with their immunizations. We can help alert parents and counsel them regarding their child's immunizations. To do this it is necessary to have the most accurate records possible to evaluate. This needs to be improved because, as a whole, certifiers weren't meeting this requirement. We decided to look at the barriers.

Target Goal

By 10/1/12 have at least 30% of 18 month old children with 4:3:1:3:3:1 immunizations documented in WIC charts and, if not up-to-date, at least 50% of charts with documentation in place for follow up.

Baseline Data



What change ideas (theories) did you have before you started testing changes?

We thought about ways to better remind parents to bring their children's immunization records with them to appointments but realized in the walk through, they already get one to two reminders. Instead of going down that route we decided to look at why families don't have up-to-date records. The utilization of the Immunization Registry at Physician practices then became our target.

DO

What ideas for improvement did you test?

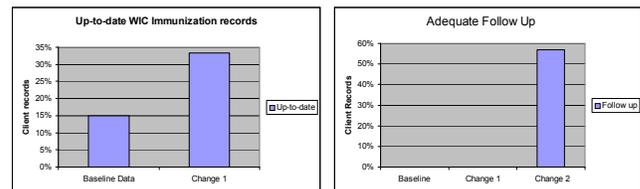
We decided to access the Immunization Registry before the clients' WIC appointments. They would be assessed by the Immunization designee for completeness and then placed in the client chart. In WIC clinic this would stimulate a conversation if immunizations were missing and help remind certifiers to ask parents if they have an additional record with them. The focus was on 18 month olds as there was already an office protocol in place concerning this age group due to the importance of reaching a fully vaccinated status by age 2.

The next idea was not tested due to our meeting with our executive sponsor. She felt that it would be too timely to call physician offices during WIC visits. We decided to assess our current protocol and update it to clearly state when and how we will need to follow up on under immunized children. The changes were then shared with all the WIC certifiers.

STUDY

What were the results of your test(s)? What is your final post-change data compared to the baseline data?

With our three PDSA cycles, we made two significant changes. Change one on the graph below represents printing off the immunization records from the Registry and placing in client charts before they're seen in clinic. This change doubled the number of 18 month old charts with fully up-to-date records. However, we realized at this point we needed to look more closely at our follow up procedure. This is where change two comes from (PDSA cycle 3). Certifiers were trained on the new procedure and they bought in to the plan as seen by the increase in documented follow up.



Now that we have a more concrete and effective protocol in place, certifiers are better able to identify and address children who are behind on immunizations.

ACT

What lessons did you learn from the process? How will this change be sustained?

We learned that despite extensive planning and brainstorming, we kept our scope almost too specific and missed an important factor. The need for addressing follow up procedures became evident after our first PDSA cycle.

There was a second benefit that happened. In addition to our records becoming up-to-date, we're able to input information into the Immunization Registry, as it isn't always up-to-date. So if parents have information the Registry is missing, we can update the Registry.

This change will be sustained by writing the changes into our office protocol. The Immunization Designee is taking on the bulk of the process however, WIC certifiers will continue to address in WIC clinics and follow up appropriately.

As we've continued this process, it seems that the Immunization Registry is improving its records as well. As a result we expect that the 30% of our up-to-date records is already higher and continuing to rise. We will perform spot checks periodically to ensure that the protocol is being followed and monitor our improvements.