



TEXAS DEPARTMENT OF STATE HEALTH SERVICES IMMUNIZATION BRANCH

RECOVERY ACT GRANT APPLICATION REACHING MORE CHILDREN AND ADULTS

The Immunization Branch of the Texas Department of State Health Services (DSHS) plans to implement multiple projects that will result in a greater number of people, both children and adults, protected from vaccine-preventable diseases.

Texas will use Recovery Act funding to: increase the capacity of DSHS field offices to make influenza immunization available; put surge capacity in place to meet potential H1N1-generated needs for greater call center and influenza vaccine management capacity; study school-based influenza immunization programs in order to identify best practices that can be replicated statewide; develop strategies to improve immunization-readiness of first responders; protect newborn infants against whooping cough; and develop technical solutions to make it easier for medical practices to use Immtrac, the statewide registry.

Brief descriptions of these plans are as follows:

- Increase the capacity of DSHS Regional Health Departments to make influenza immunization available in those areas of the state with no city or county health department. DSHS will engage nursing professionals to supplement existing capacity during the height of influenza season, making it possible to provide immunization in areas where owing to capacity limitations services are provided only infrequently. This will also support DSHS to make H1N1 vaccine available, if necessary. DSHS will also replace aging cold chain equipment and increase field office data management capacity.
- Given that it is likely that H1N1 vaccine will be made available in fall 2009, increase the Immunization Branch's capacity to manage and distribute vaccine and contract professional services to provide expandable call center capacity.
- Study existing school-based influenza immunization programs with the intent of identifying best practices that can be replicated statewide. In collaboration with stakeholders, DSHS will survey schools around the state to explore the costs and benefits of school-based programs, barriers to implementation in Texas, the potential fiscal impact of replicating such programs statewide and implications for private providers and local public health agencies.
- Develop strategies to improve immunization-readiness of first responders. An important lesson learned during recent hurricanes is that first responders are often not up to date and find themselves seeking needed vaccines at the last minute. In collaboration with sister agencies, DSHS will study ways to improve first responder immunization, conducting a situation analysis (better defining first responder groups, their sources of health care, insurance coverage, and capacity for workplace immunization provision etc.) and developing strategies to through which to improve first responder preparedness.

- Protect newborn infants and children too young to be fully immunized against pertussis by encouraging immediate family members to be immunized, thus creating a protective cocoon of immunity around the child. Develop and implement a plan to introduce cocooning to multiple birthing hospitals around the state, to pediatric participating in the Vaccines for Children Program and to the obstetrics and gynecology practice setting.
- While private practices may wish to participate in Immtrac, the Texas immunization registry, an important barrier has been technical difficulties with electronic communications between practice electronic systems and Immtrac. Recovery Act funding will make it possible for DSHS to engage the necessary expertise to more deeply analyze the issues, identify the requirements that must be met, and develop the technical solutions necessary to facilitate electronic communication.