

TISWG ACCOMPLISHMENTS 2004-2005

Issue Topic	Specific Issues Identified by TISWG Members	Accomplishments	Open Items	Next Steps
<p>Legislative mandate to develop working group.</p>	<p>OBJECTIVE 1: Provide support for activities to raise vaccine coverage levels and help increase awareness of the importance of early childhood and adolescent vaccination.</p> <p>OBJECTIVE 2: Work with DSHS to identify and implement improvements to the state immunization system.</p> <p>Core members include representatives from the public sector, private sector, and community groups.</p> <p>Identified 9 Categories of Issues:</p> <ul style="list-style-type: none"> • Over-Archiving • Provider Education • Reminder/Recall Systems • Targeted Consumer Outreach • Texas Immunization Registry (ImmTrac) • Data Outcomes 	<ul style="list-style-type: none"> - Introduction of Texas Immunization System concept. - Categorized, prioritized, and addressed each major topic one at a time. - DSHS and Subject Matter Experts, presented to TISWG information and background on immunization issues at each meeting. - TISWG provided input for 2006 Immunization Strategic Plan. 	<ul style="list-style-type: none"> - Continue to maintain open line of communication. - Continue to report progress to stakeholders. - 2 of 9 categories are yet to be addressed (data outcomes and Texas VFC). 	<p>Provide overview and summary of first year's accomplishments.</p>

TISWG ACCOMPLISHMENTS 2004-2005

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	<ul style="list-style-type: none"> • Texas Vaccines for Children (VFC) • Public and Parent Education • Maintenance of Medical Home 			
1. Over-Arching Issues Category A	<ul style="list-style-type: none"> - Coordination among programs, initiatives, agencies. - Understand role of state agencies in the legislative process versus non-state agencies. - Understand current efforts to raise vaccine coverage levels and timeframe to inform TISWG 	<ul style="list-style-type: none"> - Developed coordination between programs and initiative as a result of TISWG attendees and Subject Matter Experts across issues and programs. - Presented issues as they relate to the TISWG Charge. - Over 65 organizations have been represented at TISWG meetings. - Presented individual Immunization Branch's group synopsis. - TISWG reached its one-year milestone. 	<ul style="list-style-type: none"> - Continue coordination among programs, initiatives, and agencies. - Role of state and non- state agencies in legislative process. 	<ul style="list-style-type: none"> - Continue to review issue categories until each is completed. - Encourage participants to make recommendations and provide feedback to DSHS. - Engage participants in action steps to implement TISWG recommendations. - Evaluate progress.

TISWG ACCOMPLISHMENTS 2004-2005

<p>2. Provider Education Category B</p>	<ul style="list-style-type: none"> - Provider knowledge on Immunization schedules What is needed to know, who needs to know? - Ways to get education to providers.(Timeframe, CEU's). - Encourage private providers to increase immunization rates. 	<p>Briefly addressed projects that offer provider education in physician offices with TMAA "Be Wise-Immunize" project for Reminder/Recall.</p>	<p>Education curriculum for nursing students.</p>	<p>Topic to be introduced at Aug 18 meeting.</p>
<p>3.Reminder/Recall (R/R) Systems Category C <i>First addressed October 7, 2004</i></p>	<ul style="list-style-type: none"> - Physician identified barriers to R/R. - Marketing R/R systems. - Fourth dose DTaP. 	<ul style="list-style-type: none"> - R/R identified as a priority issue. - Reviewed current systems and projects. - Panel presented R/R projects initiated by DSHS across the state. - Benchmarked R/R systems via telephone survey to health departments in Michigan, Connecticut, and North Carolina. - Surveyed New Mexico about use of R/R systems - Presentation and discussion about importance of 4th dose DTaP. 	<ul style="list-style-type: none"> - Members to promote and report on R/R systems within their sphere of influence. - Invite vendor to present information about 3rd party electronic reminder/recall services. 	

TISWG ACCOMPLISHMENTS 2004-2005

		<ul style="list-style-type: none"> - Immunization Branch implemented statewide R/R project. - DSHS partnered with the TMAA to launch the “Be Wise-Immunize” R/R campaign in physician’s offices. - TISWG members agreed to promote use of R/R systems in their sphere of influence. 		
<p>4. Targeted Consumer Outreach (Formerly Recipient Access) Category D <i>First addressed February 3, 2004</i></p>	<ul style="list-style-type: none"> - Adolescents, how to reach - How to reach children non-traditional child-care settings. - Plans for changing demographics - Texas has poor adult vaccine rates. - Define Early Childhood vaccinations- age group. 	<ul style="list-style-type: none"> - Reviewed current systems and projects to reach various populations. - Revised the working group charge to include adolescents. - Sub-committee formed for adult vaccination concerns. - Developed partnerships for adult outreach. 	<ul style="list-style-type: none"> - Introduce expanded charge at 8/18 meeting. - Adult Immunization Sub-Committee to update TISWG quarterly. 	<p>Identify DSHS internal resource for Adolescent Health populations and immunization issues.</p>

TISWG ACCOMPLISHMENTS 2004-2005

		<ul style="list-style-type: none"> - Presented the new legislation (79th Legislature) on vaccination requirements for child-care entry. 		
<p>5. Texas Immunization Registry/ ImmTrac Category E <i>First addressed October 7, 2004</i></p>	<ul style="list-style-type: none"> - Privacy and confidentiality. - Registry opt-out versus opt-in. - Adults over 18 years remain in registry. - Registry reporting needs to be simplified. - Need to increase provider participation in ImmTrac. - Marketing ImmTrac Assistance. - Registry usefulness tied to complete data. 	<ul style="list-style-type: none"> - Reviewed current projects. - Identified ImmTrac as a high priority. - Introduced Implementation of HB 1921 policy changes. - Panel discussion to address current trends. - Discussed marketing and stakeholder strategies. - Provided input regarding target audiences and methods to reach those audiences. - Provided input into ImmTrac promotion and marketing plan. 	<p>Continue collaboration to educate providers and the public about ImmTrac.</p>	<p>Continue to submit articles regarding ImmTrac promotion to newsletters, organizational web sites, banners, suggested member journals, and other programs that may provide opportunities.</p>

TISWG ACCOMPLISHMENTS 2004-2005

		<ul style="list-style-type: none"> - Provided input relating to improvements to the registry and changes in registry policy, including ways to increase provider participation and registry utility to parents and providers. - Offered to collaborate to educate providers and the public. 		
6. Data Outcomes Category F	<ul style="list-style-type: none"> - Need to share information on data to identify pockets of need. -Channel non-coordinated data from various agencies. - Measure outcomes with increasing success of vaccines. - Litmus test on all ideas: Ask does this activity raise rates? - Lack of good data makes it difficult to identify what drives 20% of populations not to get immunized 			This topic has not been addressed.

TISWG ACCOMPLISHMENTS 2004-2005

7. Texas Vaccines for Children Category G	<ul style="list-style-type: none"> - TVFC reimbursement and participation. - Need to increase TVFC providers in the state. 			<p>This topic has not been addressed.</p>
8. Public and Parent Education Category H <i>First addressed November 4, 2004</i>	<ul style="list-style-type: none"> - Change our message. - Prevent examples of messages that point out yesterday versus today. - Point out problems of lack of herd immunity. - Use a more segmented approach to demand based upon community perceptions of immunizations. - Focus efforts on risk communication. - Increase parent education on immunizations, recommendations and schedules. - Change the message to a positive message or model about vaccines. 	<ul style="list-style-type: none"> - Presented history and effectiveness of media campaigns from the last decade. - Reviewed marketing evaluations on current promotions. - Provided guidance to focus the evaluation of the 2003-2004 immunization media campaign. - Provided guidance to focus the next phase of the immunization media campaign. 	<ul style="list-style-type: none"> - Media marketing timelines to be address at later date. - Passport models. - Adolescent Education on Immunizations. - Post partum education. - ImmTrac parental education. - Medical Home 	<ul style="list-style-type: none"> - Engage TISWG and SME resources for parent and public education. - Engage TISWG members in speaking opportunities. - Submit materials for publication to TISWG resources to reach parents and health care professionals and others. - Revisit evaluation aspects of media campaign and return to public and parent education specifics at a later date.
9. Maintenance of Medical Home Category I <i>First addressed April 14, 2005</i>	<ul style="list-style-type: none"> - Access to children without medical home - Definition of medical home? - Two-tiered system. - ERISA Plans - Educate parents new to medical home concept. 	<ul style="list-style-type: none"> - Reviewed current medical home projects. - Reviewed various definitions of medical home. 	<ul style="list-style-type: none"> - Report on statewide medical home workgroup activities (two TISWG members also sit on this workgroup). 	<ul style="list-style-type: none"> - Continue regular reports of Medical Home Workgroup issues at subsequent TISWG meetings.

TISWG ACCOMPLISHMENTS 2004-2005

		<ul style="list-style-type: none"> - Suggested TISWG be represented at statewide medical home workgroup. - Distributed articles about medical home to TISWG members. - Began discussions with Texas Health Steps about education of medical home concept to Medicaid populations. 	<ul style="list-style-type: none"> - Arrange for TISWG to provide orientation to medical home workgroup to address concerns about definition of medical home and best practice for improving immunizations. - Understand ERISA Plans and the two-tier systems. 	<ul style="list-style-type: none"> - Continue to coordinate distribution of immunization and medical home education materials to parents as well as providers. - Update medical home issues as needed.
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