

FY 2024 Immunization Contract Review Tool

Date of Contract Review: _____ Contract Review Period: _____

LHD: _____ Clinic/Site Visited: _____

Name and Title of Reviewer(s): _____ Meeting Type (In-Person or Virtual): _____

Required Activity	Activity	Review Criteria	YES	NO	NA/NR	Comments	
Section 1. Program and Contract Management							
1	1.1.03	Attend all required trainings for each Area of Work as specified in the Immunization Program Contractor’s Guide. Ensure that the immunization program manager and TVFC and ASN Coordinator attend the annual Immunization Section mandatory in-person meeting.	Attend annual IPRE in-person meeting. Attend ImmTrac2 Training.				
			Attend Perinatal Hepatitis B Prevention Program Summit.				
			Attend any other required trainings as required by DSHS.				
2	1.1.07	Develop and implement an employee immunization policy for Contractor’s immunization program staff according to CDC recommendations.	Develop Employee Immunization Policy.				
3	1.1.08	Maintain a record of orientation (new staff) and ongoing training for existing contract-funded staff involved in providing immunization services.	Develop records of orientation and ongoing training for contract-funded staff.				

Section 1 – Summary and comments:

Required Activity	Activity	Review Criteria	YES	NO	NA/NR	Comments
Section 3. Managing TVFC and ASN Providers						
4	3.7.02	For personnel identified by DSHS, attend and/or complete the following trainings: <ul style="list-style-type: none"> • CDC Immunization Trainings • TVFC/ASN Annual Trainings • Annual RE Training • PHR Trainings 	Identified personnel attended/completed the following training.			
Section 3 – Summary and comments:						
Section 4. Epidemiology & Surveillance						
5	4.1.02	Determine the number of newborns that do not receive the first dose of the hepatitis B vaccine and/or HBIG and work with those facilities to ensure all at-risk infants receive the initial hepatitis B vaccine and HBIG within 12 hours of birth.	Document technical assistance provided to any facilities that did not provide appropriate post exposure prophylaxis (PEP).			
6	4.1.03	Ensure timely follow-up and reporting of case status of possible HBsAg+ pregnant women within seven days of notification.	Provide information and feedback to DSHS Assessment, Compliance and Evaluation (ACE) Group on possible HBsAg+ pregnant women listed on vital stats/NBS/HBIG reports.			

Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
7	4.2.01	Contact and provide case management to 100% of HBsAg+ pregnant women identified, along with their infants and contacts.	Contact and provide case management to 100% of the HBsAg+ pregnant women identified.				
8	4.3.01	For all cases documented as 'lost-to-follow-up' in the Peri Hep B Prevention Database, the appropriate number and types of attempted activities performed in locating the mother or guardian of the infant are documented.	≥90% of 'lost-to-follow-up' cases have appropriate follow-up completed and documented in the Peri Hep B Prevention Database.				
9	4.4.01	Require Perinatal Hepatitis B Case Manager to attend the bi-annual conference.	Perinatal Hepatitis B Case Manager attends the bi- annual conference. If not, another staff attends on the Case Manager's behalf.				
Section 4 – Summary and comments:							

Required Activity	Activity	Review Criteria	YES	NO	NA/ NR	Comments	
Section 5. Providing a Vaccine Safety Net							
10	5.2.01	Train all clinic staff on the policies outlined in the TVFC and ASN Provider Manual and LHD procedures for implementing policies. Procedures should include - <ul style="list-style-type: none"> • storage and handling guidelines • vaccine management • use of the DSHS vaccine management system (VAOS) • compliance guidelines 	Trained all clinic staff on policies outlined in the TVFC and ASN Provider Manual and the LHD procedures for implementing them.				
11	5.2.02	Develop clinic staff education requirements. Ensure that persons who administer vaccines and staff that are involved in the vaccine administration process (including those who screen immunization records and administer vaccines) to follow ACIP standards for children and adults and are knowledgeable on immunizations and immunization practices. This can be accomplished by having staff complete the most current CDC Pink Book					

Required Activity		Activity	Review Criteria	YES	NO	NA/NR	Comments
12	5.2.03	Develop eligibility screening and documentation policy for all LHD clinics. Provide training to all staff on appropriate screening and documentation for TVFC eligibility to ensure TVFC vaccine is administered only to TVFC-eligible children. Implement policy and plan for routine adherence to eligibility policies.	Developed eligibility screening and documentation policy for all LHD clinics.				
13	5.2.04	Develop and implement a policy on the use of the Texas Immunization Registry. Train LHD staff on conducting client searches in the Texas Immunization Registry and how to effectively enter client demographic and immunization information.	Developed and implemented a policy on the use of the Texas Immunization Registry.				
14	5.3.06	Maintain a list of current providers within the LHDs jurisdiction who accept children on Medicaid or CHIP and make this list available to clinic clients and families as needed. (STANDARD)	Maintain a list of current providers within the LHDs jurisdiction who accept children on Medicaid or CHIP and make this list available to clinic clients and families as needed.				
15	5.3.07	Refer uninsured clients to Medicaid or the Children's Health Insurance Program (CHIP) as appropriate. (STANDARD)	Refer uninsured clients to Medicaid or the Children's Health Insurance Program (CHIP) as appropriate.				

Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
16	5.3.10	Establish "standing orders" for vaccination in LHD Contractor's clinics that are consistent with legal requirements for standing orders (including, but not limited to, those found in the Texas Medical Practice Act).	Standing orders are available to review during On-Site Evaluation.				
17	5.3.19	Provide immunization services at times other than 8 a.m. to 5 p.m., Monday through Friday, at least once per month.	Provided immunization services at times other than 8 a.m. to 5 p.m., Monday through Friday, at least once per month.				
Section 5 – Summary and comments:							

Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
Section 7. Education and Partnership							
18	7.3.02	Develop and implement a written communications and customer service plan for Contractor's staff to ensure customers receive consistent, correct immunization information and services in a courteous and friendly manner on a timely basis.	Developed and implemented a written communications and customer service plan.				
19	7.3.03	Educate healthcare workers on the importance of keeping themselves up-to-date with the vaccine schedule.	The LHD will distribute annual vaccine schedules as well as share pertinent education materials on vaccine schedule changes and recommended doses.				
20	7.4.01	Appoint an immunization coalition coordinator.	Appoint an Immunization Coalition Coordinator.				
			Document outreach activities.				
21	7.4.02	Develop and maintain a planning group with the goal of forming long-term community partners.	Develop and maintain a planning group with the goal of forming long-term community partners.				
22	7.4.03	Engage and recruit community groups and immunization stakeholders to form long-term partnerships	Engage and recruit community groups and immunization stakeholders to form long-term partnerships				

Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
23	7.4.04	Facilitate and host partnership meetings.	Facilitate and host partnership meetings.				
24	7.4.05	Participate in monthly calls to provide updates on partner collaboration activities.	Participate in monthly calls to provide updates on partner collaboration activities.				
25	7.4.13	Participate in special initiatives as directed by the DSHS Immunization Section.	Participated in special initiatives when directed by the DSHS Immunization Section.				
26	7.5.01	Attend all TISWG and other designated stakeholder meetings. These meetings can be attended remotely.	Attended TISWG designated stakeholder meetings.				
27	7.6.03	Promote ImmunizeTexas.com the Immunization Section's website; and any other Immunization Section newsletters to providers in the local jurisdiction.	Promoted ImmunizeTexas.com, the Immunization Section's website, and any other Immunization Section newsletters to providers in the local jurisdiction.				

Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
28	7.6.05	Share available federal, state, and/or local adolescent vaccination coverage and/or vaccine-uptake-related data with partner organizations, adolescent immunization providers, and other stakeholders.	Distributed available federal, state, and/or local adolescent vaccination coverage and/or vaccine-uptake-related data with partner organizations, adolescent immunization providers, and other stakeholders.				
Section 7 – Summary and comments:							

Suggested activities

Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
Section 1. Program and Contract Management							
1	1.1.12	Use the results of the community assessment conducted in activity 4.7.01 to review and address an immunization need within the LHD jurisdiction.	Complete a Community Needs Assessment.				
			Address at least one gap identified in the Community Needs Assessment.				
Section 1 – Summary and comments:							

Suggested Activity	Activity	Review Criteria	YES	NO	NA/ NR	Comments	
Section 2. Facility Immunization Assessments							
2	2.3.01	Educate and inform first responder facilities on the use of the Texas Immunization Registry to assess first responder immunization records and forecast any future immunization needs. Use the First Responder Immunization Toolkit (FRIT) to drive these activities.	Provide education to first responder facilities (using the DSHS FRIT).				
Section 2 – Summary and comments:							

Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
Section 3. Managing TVFC and ASN Providers							
3	3.1.03	Collaborate with medical societies and/or local health provider organizations to identify providers to recruit and enroll.	Collaborate with medical societies and/or local health providers to identify providers to recruit.				
4	3.2.02	Promote TVFC and ASN Provider achievements: <ul style="list-style-type: none"> • Implement incentives for provider sites that reach • Implement incentives to recognize sites during national observances (i.e. NIIW, NIAM, and NIVW). 	Promote TVFC/ASN provider achievements.				
			Implement incentives (Incentives are not intended to have any monetary value or to be exchanged for any monetary value) for provider sites that reached vaccination coverage rate goals				
			Implement incentives (Incentives are not intended to have any monetary value or to be exchanged for any monetary value) to recognize sites during national observances.				

Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
5	3.5.06	Review submitted reports to ensure data quality. The review includes: <ul style="list-style-type: none"> • Quarterly, review 25% of enrolled sites to ensure contacts are listed correctly in VAOS. • Quarterly, review 25% of enrolled sites and provide education for the Vaccine borrowing and Vaccine transfer forms. 	Using monthly reports, provide education for the Vaccine borrowing and Vaccine transfer forms for 25% of enrolled sites, quarterly.				
6	3.5.07	Review monthly data logger reports for 25% of providers in LHD contractor's jurisdiction to validate the accuracy of provider submitted monthly temperature reporting forms.	Review monthly data logger reports for 25% of providers to validate the accuracy of provider submitted monthly temp reporting forms.				
7	3.5.09	Conduct a monthly review of 10% of randomly selected providers in LHD contractor's jurisdiction to identify vaccine loss report forms that were completed in VAOS but were not submitted.	Conduct a monthly review of 10% of randomly selected providers to identify vaccine loss report forms that were completed in VAOS but not submitted.				
8	3.5.10	Conduct a quarterly review of 25% of providers in LHD contractor's jurisdiction to identify those that have adjusted more than 10% of their vaccine inventory.	Conduct a quarterly review of 25% of providers to identify those that have adjusted more than 10% of their vaccine inventory.				

Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
9	3.5.11	Conduct a quarterly review of 25% of providers in LHD contractor's jurisdiction to ensure the reported patient population matches the number of doses ordered.	Conduct a quarterly review of 25% of providers to ensure they reported patient population matches the number of doses ordered.				
10	3.7.03	Ensure that the TVFC / ASN Coordinator conducts quality assurance on 10% of the temperature recording logs that were reviewed by their staff each quarter.	TVFC/ASN Coordinator conducts QA on temperature recording logs.				

Section 3 – Summary and comments:

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Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
Section 5. Managing TVFC and ASN Providers							
11	5.3.24	Participate in public health emergencies and exercises that may require vaccine administration in shelters to the public or first responders.	Participate in public health emergencies and exercises that may require vaccine administration in shelters to the public or first responders.				
12	5.3.25	Conduct outreach activities to raise the immunization coverage levels of uninsured adults by visiting sites such as homeless shelters, halfway houses, day labor sites or other locations.	Conducted outreach activities to raise immunization coverage levels of uninsured adults by visiting the sites.				
13	5.3.26	Coordinate with community vaccinators to conduct annual employee-based vaccination clinics for influenza vaccine administration.	Coordinate with community vaccinators to conduct annual employee-based vaccination clinics for influenza vaccine administration.				
Section 5 – Summary and comments:							

Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
Section 6. Increased Use of the Texas Immunization Registry							
14	6.1.01	Conduct Texas Immunization Registry (the Registry) outreach to organizations regarding missing vaccinations for children and adults for whom consent has been granted but who do not have complete immunization records.	Conducted Texas Immunization Registry outreach to organizations regarding missing vaccinations for whom consent has been granted but who do not have complete immunization records.				
15	6.2.01	Conduct activities aimed at increasing the consent rate for all age groups, including adults and individuals identified as recently moved in-state.	Perform outreach activities aimed at increasing the consent rate for all age groups, including adults and individuals identified as recently moved in-state.				
16	6.3.02	Provide orientation to all new Texas Immunization Registry organizations within the LHD Contractor's jurisdiction at least once a year and maintain documentation of all technical assistance provided (e.g., telephone logs). Provide education and training on the effective use of the Texas Immunization Registry according to the Guidelines for Increasing the Use of the Texas Immunization Registry. Identify and assist newly registered providers and new users reporting to the Registry.	Provided orientation to all new Texas Immunization Registry organizations within the LHD Contractor's jurisdiction at least once a year and maintain documentation of all technical assistance provided.				
			Provide education and training on the effective use of the Texas Immunization Registry according to the Guidelines for Increasing the Use of the Texas Immunization Registry.				

Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
17	6.4.02	Provide education and technical assistance to birth registrars on the effective use of the Texas Immunization Registry.	Provide education and technical assistance to birth registrars on the effective use of the Texas Immunization Registry.				
18	6.4.03	Collaborate with prenatal healthcare providers, birth registrars, hospital staff, pediatricians, and other entities to educate parents, expectant parents, and providers about Texas Immunization Registry and the benefits of participation. This includes the dissemination of DSHS educational materials as appropriate.	Collaborate with 12 entities in awardee jurisdiction.				

Section 6 – Summary and comments:

Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
Section 7. Education and Partnership							
19	7.2.01	Educate and update providers on the most current ACIP recommendations for all ages.	Educate providers on the most current ACIP recommendations.				
20	7.2.02	Inform and highly recommend to the medical community and local providers within the LHD Contractor's jurisdiction the most current CDC Epidemiology and Prevention of Vaccine-Preventable Disease (EPI-VAC) training (www.cdc.gov/vaccines/ed/webinar-epv/index.html). The most current "Pink Book", titled Epidemiology and Prevention of Vaccine-Preventable Diseases, can be found on the CDC website at cdc.gov/vaccines/pubs/pinkbook/index.html . Provide training and technical assistance (on-site/virtual) to providers.	Provide training and technical assistance (on-site/virtual) to providers.				

Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
21	7.2.03	Provide information to community healthcare employers (hospitals, clinics, doctor offices, long-term care facilities) about the importance of vaccination of health care workers.	Provide information to community healthcare employers about the importance of vaccination of healthcare workers.				
22	7.4.09	Plan partnership activities with local Women, Infants, and Children (WIC) programs to ensure that children participating in WIC are screened and referred to their "medical home" for vaccination using a documented immunization history in accordance with the Standards for Child and Adolescent Immunization Practices.	Coordinate education and other activities with local WIC programs.				
23	7.4.1	Offer educational opportunities to all WIC programs in the service area, including information about online and satellite-broadcast continuing education opportunities from the CDC Continuing Education web site at https://www.cdc.gov/vaccines/ed/index.html .	Offer and publicize education opportunities to all WIC programs in the service area, including information about online and satellite-broadcast continuing education opportunities from the CDC Continuing Education website.				

Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
24	7.5.02	Host at least one immunization stakeholder meeting per quarter, in person or virtually, (four per contract year).	Host at least one immunization stakeholder meeting, either in person or remotely, this quarter.				
Section 7 – Summary and comments:							

Summary Page

(Provide other pertinent information noted during the review (e.g. successes, best practices, challenges, follow-up items, etc.)

Form Instructions

This tool is based on the activities listed in the Fiscal Year 2024 DSHS Immunization Contractors Guide and should be used for desk reviews after August 1, 2023. Each activity is noted as one of the following:

- Required – activities essential to the implementation and/or operation of an Immunization Program. These activities are assigned performance metrics.
- Standard (Universal) – activities that are normal/standard to the implementation and/or operation of an Immunization Program. Performance measures are not required.
- Suggested – activities recommended but not required.

For each item reviewed, the reviewer must select Yes, No, Not Applicable (N/A) or Not Reviewed (N/R) where appropriate.

- Yes - standard met fully; reviewer can acknowledge successes and best practices in the comment section.
- No - standard met; reviewer must describe the discrepancy and note any education or technical assistance provided.
- NA - item was not applicable or not reviewed at site visit.
- NR – provide a brief explanation of why the item was not reviewed.

The local health department (LHD) must provide a written response for each item checked “No” that is not immediately corrected during the site visit and produce a Corrective Action Plan (CAP) as directed by DSHS that encompasses proposed solutions for all items marked as “No.” The CAP should be submitted within 30 days of the site or desk review.

Any additional information such as issues, concerns, challenges, successes, collaborations, etc. should also be documented in the tool. Naming convention - please save the document as LHD_FY Year_Contract Review Tool.