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Facilitate Return for Vaccination

Strategy Overview

This core strategy focuses on implementing clinical and clerical processes that support making and keeping appointments and addressing barriers to patients returning for timely vaccination. Providers can help keep patients on time for vaccination by making vaccination more accessible. This includes expanding practice hours, allowing walk-in vaccination appointments, and ensuring the next vaccination appointment is scheduled before the patient leaves the office. Systems that remind patients of upcoming vaccinations and recall patients who have missed vaccinations can help reduce the likelihood of a patient missing recommended vaccinations.

Examples of Strategy Best Practices, Implementation Gaps, Solutions, and Technical Assistance			
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
 Use effective scheduling protocol by Scheduling the next appointment (e.g., well-child visit, nurse-only, etc.) before the patient leaves the office, either in the exam room or at check-out. Scheduling the next vaccination visit and the next well-child visit to occur on the same day whenever possible. Offering various types of appointments (e.g., nurse-only appointments, vaccination-only clinic days, etc.) where vaccinations can occur. 	The provider's EHR or scheduling software does not allow scheduling appointments far in advance.	Investigate and implement modifications to the EHR or scheduling software to support the advance scheduling of vaccination visits.	Work with the provider to identify steps to address any software limitations that prevent scheduling visits months in advance. Help develop a plan of action to be made into action steps for the strategy implementation plan.
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Maintain accurate patient contact information by verifying and updating patient contact information at each appointment to support scheduling and reminder and recall efforts.	The provider does not have a routine protocol for updating patient contact information.	Establish a written protocol and add it to the office SOP for check-in staff.	Brainstorm with the provider to identify workflow changes to ensure all patient contact information is reviewed and updated upon check-in, regardless of the type of patient visit, and develop steps for adding those changes to the office SOP.





	Facilitate Return for Vaccination			
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance	
 Take action to prevent missed opportunities by Routinely generating lists of patients that have upcoming appointments using various technologies via EHR, IIS-based, or scheduling software platforms. Screening patients for vaccination eligibility at each visit regardless of the type of visit (e.g., sick visit, well-child, sports physicals, etc.). Maintaining accurate vaccination records. 	Check-in staff runs a daily report of upcoming appointments for the following day at the close of business. However, the list does not include vaccination information.	Train check-in or designated clinical staff to use the IIS to look up vaccinations due for patients with appointments the following day and indicate who is due for vaccination.	Work with provider staff to determine who should be responsible for reviewing patient charts or looking for prompts for upcoming vaccinations and list workflow changes that can be added to the office's SOP.	
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance	
Conduct routine training on current ACIP-recommended immunization schedules to inform when to schedule patients for subsequent visits.	There is limited time to train staff on the ACIP schedule.	Designate time periodically (e.g., bi- monthly, quarterly, etc.) for staff training and incentivize them to complete it (e.g., provide a working lunch).	Provide links to training videos, webinars, and courses staff could complete. Assist with partner collaboration (ACS, AAP, Coalition, etc.) to arrange for staff training.	
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance	
Inform parents of future vaccine dates by giving parents a copy of their current immunization record and a list of future recommended vaccines with precise due dates on paper and via electronic sources.	Parents are not provided a copy of the patient's immunization record or a list of future doses and due dates.	Give the parents a paper version of the patient's immunization record and a list of forecasted due dates for future vaccinations and promote using the provider's patient portal to access the information. Encourage parents to place the next scheduled appointment date and time on their mobile calendar.	Brainstorm with the provider and list viable options for how the provider can keep parents informed of patient immunization status and future doses. Help to create a standard process for staff to follow.	





Facilitate Return for Vaccination			
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Implement reminder and recall systems using multiple methods (e.g., text messages, portal messages, e- mails, postcards, phone calls, etc.) to remind patients of upcoming appointments and to recall patients who have missed an appointment or become overdue for vaccination.	Provider staff have limited time for reminder and recall efforts, such as phone calls and postcards.	Implement standard procedures for reminders and recall notices that use multiple methods.	Review EHR and jurisdictional IIS capabilities for reminder and recall options. Share evidence-based best practices for available options, including the language and timing of reminders. Connect the provider with a partner that offers free reminders.
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Track no-shows and canceled appointments and contact those patients within the same week to reschedule.	The practice has many no-shows and canceled appointments because of parents' schedules. Staff is not trained in calling patients to reschedule missed visits.	Offer appointments outside standard office hours and periodically hold weekend clinics. Train staff to call or text patients who are no-shows to reschedule. Develop standing orders allowing nurse-only vaccination visits.	Explore options with the provider for holding extended office hours or weekend clinics. Discuss how the provider can use quick nurse-only appointments for vaccination. Share samples of standing orders to allow nurse-only vaccinations.





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Leverage IIS Functionality to Improve Immunization Practice

Strategy Overview

This core strategy focuses on using IIS functionality to improve timely vaccination and to track patient vaccination status. When providers maintain patient vaccination data in the IIS, they can use its functionality more effectively to self-monitor their performance. The IIS can assist in increasing vaccination coverage for a provider's patient population by providing vaccination recommendations, provider-level coverage assessments, and reminder and recall for patients due or overdue vaccinations. During the IQIP cycle, consultants can help providers understand their role in ensuring IIS data for their patients are accurate, timely, and complete. When providers improve the quality of patient data in the IIS, the IIS will, in turn, improve the quality of its output. Reminder and recall lists, vaccine forecasts, and coverage assessments generated by the IIS will reveal valuable information for improving on-time vaccination, identifying missed opportunities, and monitoring overall performance. Consultants should be familiar with the provider's current IIS reporting method (e.g., electronically (flat file, HL7, bi-directional query, etc.) or direct data entry) and status (e.g., reports regularly, sometimes, or rarely).

Examples of Strat	Examples of Strategy Best Practices, Implementation Gaps, Technical Assistance, and Action Items			
Best Practice	Example of a Gap in Implementation	Example of a Solution	Examples of Technical Assistance	
Maintain accurate patient contact information by verifying and updating patient contact information in the IIS at each appointment to support	The provider does not have a routine protocol for updating patient contact information in the IIS.	Establish and implement a written protocol outlining routine check-in staff procedures for keeping patient contact information current.	Brainstorm workflow changes that can be added to the office's SOP to ensure all patient contact information is updated upon check-in, regardless of	
scheduling, reminder, and recall efforts.			the type of patient visit, and entered into the IIS.	
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance	
Report all historical and administered vaccination data to the IIS routinely to support complete and up-to-date patient records.	The provider only enters vaccination data into their EHR.	Establish a written protocol and train staff on IIS reporting processes. If not doing so already, establish EHR-IIS interoperability between the IIS and the EHR.	Provide tips for the provider in investigating and establishing EHR-IIS interoperability.	
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance	
Assess immunization status in the IIS for doses due at every patient encounter, including drop-ins and sick visits.	Provider staff do not know how to use the IIS for assessing immunization status. They primarily use their EHR for this task.	Explain how the IIS consolidates vaccine information from multiple providers and recommends future vaccines.	Demonstrate how to look up patient vaccination history and immunization status in the IIS or link provider staff with the jurisdictional IIS program for additional training.	





Leverage IIS Functionality to Improve Immunization Practice			
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Update patient active/inactive status in the IIS when a patient moves, leaves the practice, or is no longer seen by the provider.	Provider staff does not manage PAIS status of their patients in the IIS, leading to inaccurate IIS-based assessment reports.	Explain the role of PAIS in the accuracy of IIS assessment reports and how recommendations and coverage will become more accurate when patient PAIS is routinely reviewed and updated.	Explain the available patient status indicators, how and when to update them, and suggest assigning them as a routine task to a staff member.
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Use a prompt system to notify staff when vaccinations are due at every patient encounter, including drop-ins and sick visits.	Provider staff does not know how to set up the EHR for prompting when vaccinations are due.	Provider arranges for training on how to set up and use the EHR's vaccination prompt system.	Brainstorm action items for researching prompt functionality and set up in the EHR for vaccination screening at patient check-in.
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Generate patient line lists routinely to identify patients not up-to-date and overdue to determine future due dates for vaccines.	Provider staff does not know how to generate patient line lists using the IIS.	Train the provider staff on generating patient line lists in the IIS.	Demonstrate how to generate patient line lists in the IIS or link provider staff with jurisdictional IIS program staff for additional training.
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Assess practice performance and generate practice-level coverage reports at regularly scheduled intervals for single vaccine and combination series for various age cohorts.	Provider believes their EHR data is better than the IIS. Provider staff does not know how to use the IIS to generate practice-level coverage reports.	Suggest comparing IIS vaccination records to those in the EHR to see if records are synchronized. Determine if the IIS offers functionality that can complement those of the provider's EHR.	Explain to provider staff how they can benefit from consulting the IIS for vaccination information. Demonstrate how to generate practice-level coverage reports or link provider staff with jurisdictional IIS program staff for additional training.
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Use reminder and recall functionality to communicate with patients about appointments (e.g., future well-child, vaccination-only, and follow-up sick appointments).	Provider staff does not know how to use the IIS's reminder/recall functionality.	Explain the benefits of reminder and recall for increasing on-time vaccination and available options using the IIS.	Demonstrate how to set up reminders and recalls in the IIS or link provider staff with jurisdictional IIS program staff for additional training.





Give a Strong Vaccine Recommendation

Strategy Overview

On-time vaccination depends on parents choosing to vaccinate their children, and providers play a critical role in leading parents to that decision. Parents usually consider their child's healthcare professional one of the most trusted vaccine information sources. This strategy focuses on the prescriber's interaction with the patient and parent, how the provider introduces the topic of vaccination, presents vaccination recommendations to parents, and addresses their concerns.

Examples of Stra	Examples of Strategy Best Practices, Implementation Gaps, Technical Assistance, and Action Items			
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance	
Best Practice Use effective communication approaches (e.g., presumptive language, bundling approach, sandwiching recommendations, etc.) when recommending vaccines.	Example of a Gap in Implementation The provider has always asked parents about their vaccination choice and may need help breaking their long- standing habit.	Example of a Solution Train the provider on presumptive language and a bundling approach when recommending vaccines.	Example of Technical Assistance Engage in role-play exercises with staff using the announcement approach. Play the physician's role first to demonstrate, then as the hesitant parent to provide an opportunity to practice and receive feedback. Provide links to sources such as <u>the HPV IQ</u> website or CDC's <u>Adolescent</u> <u>#HowIRecommend Vaccination Video</u> Series.	
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance	
 Prevent missed opportunities to vaccinate by Assessing immunization status for every patient at every visit. Recommending all eligible vaccines. Administering all vaccines at the same visit. 	The provider does not consistently check a patient's record for vaccine doses due and does not use the bundling approach when recommending multiple vaccines simultaneously.	Develop a protocol to review all patient records and specifically look for doses due. Train and rehearse with the provider on using presumptive language and a bundling approach when recommending vaccines.	Review the provider's current vaccination screening process and suggest modifications to improve the approach. Provide links to videos that demonstrate assumption and bundling approaches.	



Overview of IQIP Core Strategies



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Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Listen to parents and seek to	Parents sometimes still refuse or delay	Have various paper and digital	Provide links to resources focused on
understand the concerns behind	vaccination despite strong	resources to provide to parents that	increasing vaccine confidence and
parents' questions before responding.	recommendations.	address their specific concerns and	addressing common parental
Willingness to listen and acknowledge		explain the risks of not vaccinating	concerns. Suggest ways to promote

understand the concerns behind parents' questions before responding. Willingness to listen and acknowledge parents' concerns plays a role in building trust.	vaccination despite strong recommendations.	resources to provide to parents that address their specific concerns and explain the risks of not vaccinating (e.g., vaccine-specific information from reputable sources and the "If You Choose Not to Vaccinate Your Child, Understand the Risks and Responsibilities" handout), and be available if they have further questions.	increasing vaccine confidence and addressing common parental concerns. Suggest ways to promote the information within the practice and with parents.
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Reduce disparities / promote vaccine	Provider-level coverage stratified by	Discuss the provider's current	Provide education on unique
equity by training prescribers to	race and ethnicity shows that fewer	approach with patients and parents	challenges within minority
recognize the diversity within their	patients in minority populations are	when discussing vaccines. Using a	populations and the potential positive
community and acknowledge the	up to date on their vaccinations, and	health equity lens, provide feedback	and negative impacts of their current
systemic, cultural, and historical	the provider uses the same vaccine	on the potential impact of their	vaccination messaging. Train provider
reasons some patients may have low	recommendation approach and	approach among the diverse	staff on culturally appropriate
confidence in vaccines.	communication style for all patients	populations in their community.	messaging for the populations they
	and parents.		serve.
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Receive routine training to prepare	There is limited time to train staff on	Designate allotted time periodically	Provide links to training videos,
for and focus on the vaccination	the ACIP schedule and how to	(e.g., bi-monthly, quarterly, etc.) for	webinars, and courses, including those
discussion with parents on the current	promote vaccination.	staff to complete the ACIP schedule	for which staff can receive CE credit.
ACIP Recommended Routine and		and communications training. Offer	
Catch-Up Immunization Schedules.		incentives for completion (e.g., CEUs,	
		provide lunch).	





Strengthen Vaccination Communications

Strategy Overview

The spread of vaccine mis/disinformation puts patients at risk for vaccine-preventable diseases. Confidence and trust in vaccines are built through conversations between parents, doctors, nurses, pharmacists, and community members. Patients and parents can feel more confident about vaccinating when everyone in the practice shares the same message. Everyone has a role in supporting vaccination, from the front desk to the exam room to checkout. Strengthening vaccine communications helps providers to:

- Increase positive vaccination messaging throughout their practice
- Provide accurate, easily accessible information on vaccines
- Engage in effective vaccine conversations with parents

The strategy includes developing, updating, and disseminating the provider location's patient vaccination policy. It also includes other approaches to vaccination messaging, such as displaying flyers and posters in the waiting room and examination rooms and providing vaccination-related content in emails, mailings, website content, and social media posts. The messengers and messages used to convey accurate information about vaccines are essential to combating mis/disinformation and improving vaccine confidence. Prioritizing clear, positive messaging about vaccination by all clinic staff creates an environment where patients and parents can have their concerns addressed and feel affirmed in their decision to vaccinate their child. This strategy covers internal communications (e.g., staff meetings, training to refine clinic workflows, etc.) and external communications (e.g., public-facing messaging like websites, newsletters, etc.).

Examples of Strat	Examples of Strategy Best Practices, Implementation Gaps, Technical Assistance, and Action Items			
Best Practice	Example of a Gap in Implementation	Examples of a Solution	Examples of Technical Assistance	
Promote the provider's patient vaccination policy by sharing practice- wide vaccination policy with all new	The provider location currently does not have a patient-focused vaccination policy. The provider	The provider investigates the most efficient channels that can be followed to put a new patient-focused	Provide sample vaccination policies, brainstorm language specific to the provider's location, and determine the	
and existing patients and including the policy in new patient packets, displaying it in waiting areas and exam rooms.	believes that the process of creating one will be cumbersome.	vaccination policy in place.	provider's location, and determine the appropriate process for adopting a vaccination policy for patients.	



Overview of IQIP Core Strategies



Strengthen Vaccination Communications			
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Promote patient and parent education by including vaccine-related promotional material (e.g., patient vaccination policy, ACIP immunization schedule, educational one-pagers, etc.) in welcome packets for new patients and accessible locations throughout the practice.	The provider does not intentionally share vaccination promotion material with new patients or display any throughout the practice.	Include vaccine promotion material in all new patient packets and display easy-to-access handouts from reliable sources and in languages spoken among their patients and families throughout the practice.	Provide links to CDC parent education flyers in appropriate languages for inclusion in new patient information packets and for ordering posters and other promotional materials. Explore where to display material within the practice.
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance
Update and train staff by incorporating routine and current vaccine-related content (e.g., the ACIP schedule, increasing vaccine confidence, how to address common questions or mis/disinformation about vaccines, etc.) in training curricula and promoting CMEs, MOCs, and other continuing education that focuses on vaccine education.	The provider location does not provide or promote staff training on vaccines, common concerns about vaccination, or how to respond if asked questions.	Provide periodic vaccine-related training provided by authoritative sources. Seek out training curricula and CMEs, MOCs, and other continuing education focusing on vaccine education. Train all staff on the use of positive vaccination messages.	Provide links to training videos, webinars, and conferences so that staff can undergo periodic vaccine- related training provided by professional organizations, CDC, and State, territorial, and local health departments. Promote training vaccine education curricula that offer CMEs, MOCs, and other continuing education credits.





Strengthen Vaccination Communications				
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance	
Promote vaccination on the practice's website and social media by incorporating vaccine-related content and have protocols to ensure the content is routinely updated.	The provider location's website and social media account content are not updated regularly and lack links to reliable vaccination resources. The staff responsible for managing the content has competing duties.	Investigate the process for adding and maintaining updated vaccine-related content to the website and social media accounts and create a standard protocol for routine updates. Arrange coverage for staff in charge of the website and social media content.	Work with the provider to create a standard protocol for maintaining updated vaccine-related content on the website and social media accounts. Provide communication resources specific to the site's communication platforms (e.g., AAP's <u>Immunization Campaign Toolkit</u> or social media accounts, links to CDC vaccine education webpages, or web buttons for their practice's website).	
Best Practice	Example of a Gap in Implementation	Example of a Solution	Example of Technical Assistance	
Reduce disparities / promote vaccine equity by ensuring patient materials in languages spoken within the provider's community are available. Also, providing that images used in communications include the diversity of the population served and promote positive health behaviors. See <u>Health Equity Guiding Principles for Inclusive</u> <u>Communication Gateway to Health</u> <u>Communication CDC</u> for resources on promoting health equity.	The provider serves a multicultural population but does not have handouts for parents or patients in languages other than English.	Ensure that vaccine education materials using languages spoken within the provider's community are available. Include posters and handouts with images that reflect the diversity of the population served and promote positive health behaviors.	Provide resources with vaccine education and health promotion material that is available in multiple languages and specific to the site's communication platforms (e.g., AAP's <u>Immunization Campaign Toolkit</u> for the site's social media accounts, links to CDC vaccine education webpages, or web buttons for their practice's website).	