

FY2020 Immunization Contract Review Tool

Date of Review:

Contract Review Period:

LHD:

Clinic/Site Visited:

Name and Title of Reviewer(s):

Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
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 & ASN Coordinator attend the annual Immunization Unit mandatory in-person meeting.	Attend annual IPRE in-person meeting.				
			Attend ImmTrac 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 the provision of immunization services.	Develop records of orientation and ongoing training for contract-funded staff.				

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Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
4.	3.5.01	Utilize the CDC Provider Education Assessment and Reporting (PEAR) system to document TVFC compliance site-visits for all sub-contracted clinics and non-LHD Contractor's clinics (as applicable).	Use the PEAR system to document TVFC site visits.				
5	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 Responsible Entity Training • Public Health Region (PHR) Trainings 	Identified personnel attended/completed the following training.				
6	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 hepatitis B vaccine series and HBIG within 12 hours of birth.	Document technical assistance (TA) provided to any facilities that did not provide appropriate post exposure prophylaxis (PEP).				

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Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
7	4.1.04	Ensure timely follow-up and reporting of case status of possible moms as reported by DSHS within 2 weeks of receipt of report.	Provide information and feedback to DSHS Assessment, Compliance and Evaluation (ACE) Group on moms listed on vital stats/NBS/HBIG reports.				
8	4.2.01	Contact and provide case management to 100% of the number of hepatitis B surface antigen-positive pregnant women identified.	Contact & provide 100% of the number of hepatitis B surface antigen-positive pregnant women identified to DSHS Central Office.				
9	4.2.05	Case manage and report all household contacts under 24 months of age in accordance with the DSHS Immunization Contractors Guide for Local Health Departments and Perinatal Hepatitis B Prevention Manual (including serologic testing and completion of the full hep B vaccination series).	Opened a case management report on identified household contacts of HBsAG positive pregnant women under the age of 24 months.				
			Submitted a case management report on ≥90% identified household contacts of HBsAG positive pregnant women under the age of 24 months within two weeks of identification.				

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Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
10	4.3.01	For all cases documented as 'lost-to-follow-up' on the Perinatal Hepatitis B case management form, report the number and types of attempted activities performed in locating the mother or guardian of the infant to the DSHS Immunization Unit on the Perinatal Hepatitis B case management form.	All the 'lost-to-follow-up' cases have the appropriate follow-up completed and documented.				
			Submit closed case management reports on ≥90% identified 'lost-to-follow-up' cases using the Perinatal Hepatitis B case management form.				
11	4.3.02	Report to the DSHS Immunization Unit all infants born to HBsAg-positive women within 2 weeks of the event.	Within 2 weeks opened a case management report on 100% infants born to HBsAg-positive women cases.				
			Submitted a case management report on ≥90% on infants born to HBsAg-positive women within two weeks of infants' birth.				

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Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
12	4.3.03	Report to the DSHS Immunization Unit the case status of possible exposed infants (born to women of unknown or unconfirmed HBsAg status) as reported by DSHS within 2 weeks of receipt of report.	Lab Report: Identified client outcome/status for ≥75% of possible exposed infants (born to women of unknown or unconfirmed HBsAg status) as reported by DSHS within 2 weeks of receipt of report.				
			VSU Report: Contacted hospitals/providers and verified mother HBsAg status.				
13	4.3.04	Ensure timely reporting of updates in case management as requested by DSHS within 2 weeks of inquiry.	Past Due Vaccine/PVST: Verified that all cases are updated completely within 2 weeks.				
			VSU Report: Opened infant case management reports of all cases.				
14	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 attend on the Case Manager's behalf.				

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Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
15	5.2.01	<p>Train all clinic staff on the policies outlined in the TVFC and ASN Provider Manual and LHD procedures for implementing policies. Procedures should include -</p> <ul style="list-style-type: none"> • storage and handling guidelines • vaccine management • use of the DSHS vaccine management system (EVI) • compliance guidelines 	Trained all clinic staff on policies outlined in the TVFC and ASN Provider Manual and the LHD procedures for implementing them.				

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Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
16	5.2.02	<p>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.</p> <p>This can be accomplished by having staff complete the most current CDC Pink Book (Epidemiology and the Prevention of Vaccine Preventable Diseases) training and appropriate Vaccine Education Online (VEO) modules.</p>	Developed training for clinic staff requirements.				

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Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
17	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.				
18	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.				
19	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.				

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Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
20	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.				
21	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.				
22	5.3.19	Provide immunization services at times other than 8 am to 5 pm, Monday through Friday, at least once per month.	Provided immunization services at times other than 8 am to 5 pm, Monday through Friday, at least once per month.				
23	7.3.02	Develop and implement a 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 customer service plan.				
24	7.5.08	Participate in special initiatives as directed by the DSHS Immunization Unit.	Participated in special initiatives as directed by the DSHS Immunization Unit.				

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Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
25	7.6.01	Attend all TISWG and other designated stakeholder meetings. These meetings can be attended remotely.	Attended TISWG designated stakeholder meetings.				
			Attended any TISWG sub-group meetings.				
26	7.7.03	Participate, when directed, in statewide media campaigns by distributing DSHS-developed and produced public service announcements and materials to local television and radio stations, newspapers, parent publications, university newspapers, high school newspapers, and neighborhood newspapers.	Distributed Public Service Announcements and advertisements to local media outlets.				
27	7.7.04	Promote www.ImmunizeTexas.com , the Immunization Unit's website; and any other Immunization Unit newsletters to providers in the local jurisdiction.	Promoted www.ImmunizeTexas.com , the Immunization Unit's website; and any other Immunization Unit newsletters to providers in the local jurisdiction.				

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Required Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
28	7.7.06	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.				

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Suggested Activities

Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
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.				
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).				
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.				

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Suggested Activity		Activity	Review Criteria	YES	NO	NA/NR	Comments
4	3.2.02	Promote TVFC and ASN <ul style="list-style-type: none"> • Provider achievements: Implement incentives for provider sites that reach vaccination coverage rate goals. • Implement incentives to recognize sites during national observances (i.e. NIIW, NIAM, and NIVW). 	Promote TVFC/ASN provider achievements.				
			Implement incentives for provider sites that reached vaccination coverage rate goals.				
			Implement incentives to recognize sites during national observances.				
5	3.5.09	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 EVI. • 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.				

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Suggested Activity		Activity	Review Criteria	YES	NO	NA/NR	Comments
6	3.5.10	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 temperature reporting forms.				
7	3.5.12	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 EVI but were not submitted.	Conduct a monthly review of 10% of randomly selected providers to identify vaccine loss report forms that were completed in EVI but not submitted.				
8	3.5.13	Conduct a quarterly review of 25% of providers in LHD contractor's jurisdiction to identify those that have a 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.				
9	3.5.14	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.				

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Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
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				
11	4.1.03	Develop a surveillance system that includes prenatal care providers, obstetrical and gynecological care providers, family practitioners, and labor and delivery facilities to ensure all HBsAg-positive pregnant women are reported to the DSHS Immunization Unit within one week of diagnosis.	Created tracking system to keep track of prenatal providers and delivery facilities in your area.				
			Report all HBsAg-positive women to DSHS immunization Unit within one week of diagnosis.				
12	4.4.09	Provide trainings to delivery hospitals on reporting HBsAg-positive test results for women who have delivered at their facilities using the LHD contractor developed surveillance system.	Provide trainings to delivery hospitals on reporting HBsAg-positive test results for women who have delivered at their facilities using the LHD contractor developed surveillance system.				

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Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
13	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.				
14	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.				
15	5.3.26	Coordinate with community vaccinators to conduct annual employee-based vaccination clinics for influenza vaccine administration.	Documented all employee-based influenza vaccination clinics conducted.				
16	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 children and adults for whom consent has been granted but who do not have complete immunization records.				

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Suggested Activity		Activity	Review Criteria	YES	NO	NA/NR	Comments
17	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.				
18	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).	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. Identify and assist newly registered providers and new users reporting to the Texas Immunization Registry.	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.				

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Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
19	6.4.01	Provide education, training, and technical assistance to promote the effective use of Texas Immunization Registry by organizations	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.				
20	6.4.02	Identify and assist providers to establish electronic affirmation of consent.	Identify and assist providers to establish electronic affirmation of consent.				
21	6.5.02	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.				
22	6.5.03	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.				

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Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
23	7.2.01	Educate and update providers on the most current ACIP recommendations for all age groups.	Educate providers on the most current ACIP recommendations.				
24	7.2.02	Inform and highly recommend to the medical community and local providers within the LHD Contractor's jurisdiction the most current Centers for Disease Control and Prevention (CDC) Epidemiology and Prevention of Vaccine-Preventable Disease (EPI-VAC) training (https://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 http://www.cdc.gov/vaccines/pubs/pinkbook/index.html .	Provide training and technical assistance (on-site/virtual) to providers.				

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Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
25	7.2.03	Provide information to community healthcare employers (hospitals, clinics, doctor offices, long-term care facilities) about the importance of vaccination of healthcare workers.	Provide information to community healthcare employers about the importance of vaccination of healthcare workers.				
26	7.2.04	Provide training relating to Standards for Child and Adolescent Immunization Practices and Standards for Adult Immunization Practices to all immunization providers within LHD Contractor's jurisdiction.	Provide trainings relating to Standards for Child and Adolescent Immunization Practices and Standards for Adult Immunization Practices to all immunization providers.				
27	7.4.01	Appoint an immunization coalition coordinator.	Appoint an Immunization Coalition Coordinator.				
			Document outreach activities.				
28	7.4.03	Develop and maintain a planning group with the goal of sustaining a coalition.	Develop and maintain a planning group charged with coalition sustainability.				

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Suggested Activity		Activity	Review Criteria	YES	NO	NA/ NR	Comments
29	7.4.04	Engage and recruit community groups and immunization stakeholders into a coalition.	Engage and recruit community groups and immunization stakeholders into a coalition.				
30	7.4.05	Facilitate and host coalition meetings.	Facilitate and host coalition meetings.				
31	7.4.06	Participate in monthly calls to provide updates on coalition collaboration activities.	Participate in monthly calls to provide updates on coalition collaboration activities.				
32	7.4.07	Provide signed letters of agreements and other documentation of commitment to participate in coalition.	Provide signed letters of agreements and other documentation of commitment to participate in coalition.				
33	7.4.08	Document communications, group meetings, and planning of activities that promote the best practices identified in contract agreement. Documents are to be accessible during site visits.	Document communications, group meetings, and planning activities that promote the best practices identified in contract agreement.				

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Suggested Activity		Activity	Review Criteria	YES	NO	NA/NR	Comments
34	7.5.04	Coordinate educational and other 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.				
35	7.5.05	Offer educational opportunities to all WIC programs in the service area, including information about on-line 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 on-line and satellite-broadcast continuing education opportunities from the CDC Continuing Education website.				
36	7.6.02	Host at least 1 immunization stakeholder meeting per quarter (4 per contract year).	Host at least 1 immunization stakeholder meeting this quarter.				

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

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Form Instructions

This tool is based on the activities listed in the Fiscal Year 2020 DSHS Immunization Contractors Guide and should be used for reviews after August 1, 2019. 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 review.

Any additional information such as issues, concerns, challenges, successes, collaborations, etc. should be documented in the tool also.

Naming convention - please save the document as LHD_FY Year_Contract Review Tool.