

Open Door Community Health Centers (ODCHC) Childhood Immunization Innovation During COVID-19

Aim: Open Door Community Health Centers' Eureka Community Health Center (EHC) will increase the rate of children aged 0-2 who were fully immunized from 31.84% to 34.79%, the 50th Percentile for Partnership HealthPlan of California's 2020 Quality Improvement Program.

Measure:

- Outcome Measure: % of children aged 0-2 who were fully immunized by their 2nd birthday;
- Process Measures: % of patients who did not show for their immunizations; average cycle time

Changes Being Tested:

EHC aimed to continue providing immunizations to prevent other disease states from occurring during the COVID-19 pandemic and to support the health and wellbeing of children aged 0-2. EHC tested an outdoor immunization (IZ) clinic on the grounds of their health center site.

PDSA #1: Outdoor Safe Injection Immunization Tent

- Conducted phone outreach to parents of children aged 0-2, 3-4, and 11-12 based upon patient lists generated by the quality improvement team. Care teams were equipped with talking points that emphasized the health center was open and the strategies employed to keep patients safe;
- 2 pediatric nurses were each scheduled for immunization only visits (8-12 visits per day). The nurses also administered vaccinations for the Well Child Visits (14-18 visits per day) conducted on-site or through a combination of video and in-person care.
- When patients and their families arrived, they were asked to remain in their car and then were ushered into the tent; nurses provided immunization education and then administered the shots.
- The pediatrics team utilized the tent located in the front parking lot for 3 weeks and then shifted to a covered patio connected to the pediatric department. Putting up and taking down the tent each day took a lot of time and its location was far removed from the pediatrics department, essentially making warm-handoffs and restocking supplies more challenging. Additionally, visit time was lengthened by providing immunization information at the time of visit, so the team decided to test providing the immunization education at the time of the outreach call.

PDSA #2: Outdoor Safe Injection Immunization Patio

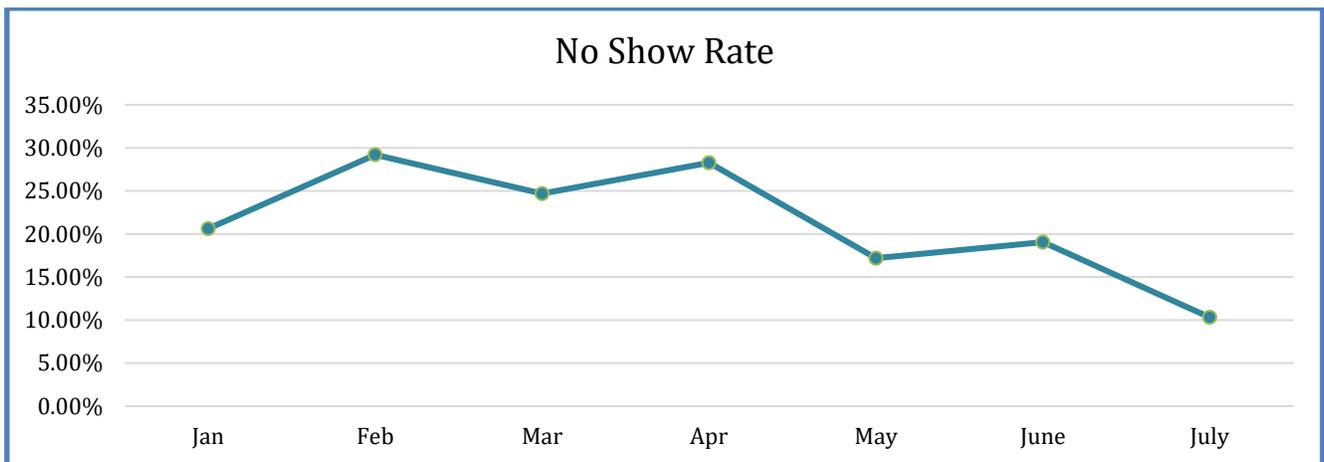
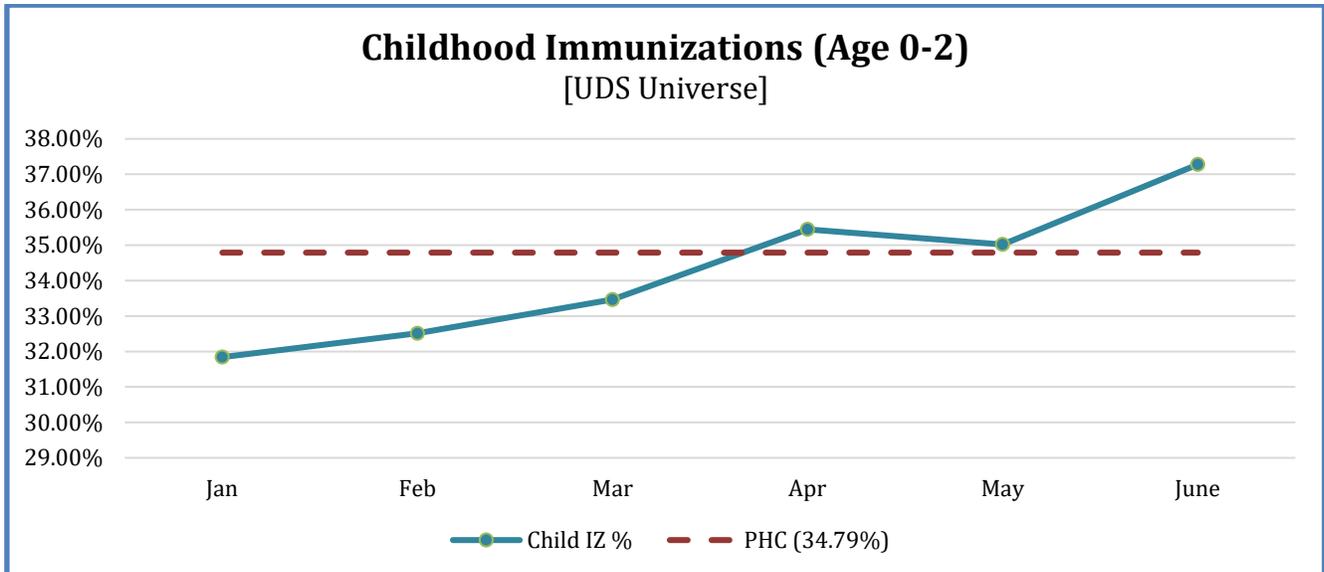
- The care team composed of front desk, medical assistants, and nurses worked collaboratively to conduct patient outreach. They called patients 1 day ahead of available appointment slots and learned that it was hard to reach patients; thus, they shifted their outreach approach to call 2-3 days before available appointment slots, which was successful. They also explained to families that morning appointments were focused on well exams and a separate entrance was utilized for these visits to support patient and family safety.
- The team converted the patio to enhance patient privacy by attaching tarps to the sides of the patio and set-up portable heaters. They also converted a table scale into an immunization cart on wheels, providing them both an exam table and a supply cart in one.

Plan

Do

Results:

Study



Additional Process Measures:

- Cycle Time (patient education call): 5-20 minutes (variable due to patient questions and concerns)
- Cycle Time (immunization only visit) 5-10 minutes (variable due to number of immunizations needed)

Future Plans: ADOPT

Given the success of the outdoor immunization clinic, ECHC has elected to adopt the intervention. ODCHC has taken the lessons learned from the outdoor clinic and applied it to other site locations, although the focus is on administering flu shots.

Act

Ideas for Additional Testing:

- **Outreach:** Outreach is the hardest and most time intensive part of the process. ODCHC plans to utilize Epic's MyChart patient portal and text messaging as a means to support outreach and patient communication.