

Shooting for Success

Improving Vaccination and Lead Screening Rates

Carolyn Cleary, MD
AHP Clinical Grand Rounds
September 15, 2016

Know the Goal Line

- 1) Teen Immunizations –

- 1 Meningococcal and 1 Tdap by age 13 years
- 90th %ile is 86.11% (75th %ile is 76.54%)

- 2) Childhood Immunizations –

- By 2 years of age 4 Dtap, 3 IPV, 3 Hib, 3 HepB, 1 MMR, 1 VZV, 4 Pneum
- 90th %ile is 85.12% (75th %ile is 81.28%)

- 3) Adult Immunizations (measure only) –

- Flu Shot for Adults annually



Know the Rules

- There are very few true medical contraindications to vaccination.
- Watch out for live vaccines (MMR, Varivax, Rotavirus) in the immunosuppressed
- Egg allergy only an issue for Flu vaccine if history of anaphylaxis
- Watch age ranges and dosing
- True anaphylaxis to a vaccine one of the few true contraindications



Work as a Team (use an Assist)

- Recalls – use your Front Office Staff to remind patients (letters, phone calls)
- Use Arcadia to know who is due OR EMR reports OR NYSIIS
- Use DMHM (Disease Management Health Reminder) in the EMR so nurses can help
- Have Schedule Available so Patients can Schedule PE's at time of visit
- Avoid Missed Opportunities (give shots at Illness Visits)



Know your Coaches

- Resources – www.immunize.org, www.cdc.gov/vaccines, www.aap.org, www.aafp.org
- Redbook from the AAP
- Arcadia Dashboard, AHP Care Managers



Current Performance

Measure Name	Num	Denom	Score	Current Percentile	90th	75th	50th	25th	# of Patient to 90th Percentile
Adolescent Imm	3125	4067	76.84%	75th	86.11%	76.54%	66.95%	56.43%	378
Childhood Imm	3122	4021	77.64%	50th	85.12%	81.28%	76.00%	70.80%	301
Lead Screen	3129	4023	77.78%	50th	85.64%	79.66%	71.84%	58.05%	317



Know the Goal Line *and* the Rules

- **Goal:** All children with **blood lead level less than 5 mcg/dL**
- **Rules:**
 - 1) **Lead Testing** – required by NYS law
 - Blood test for every child at ages 1 and 2 years
 - Also, whenever potential source of lead is identified in child’s environment
 - 2) **Lead Screening**
 - Risk assessment questions be asked at every WCC visit between 6 months and 6 years



Study Your Opponent

- **Missed Opportunities**
 - Despite the law only about half of children are tested at the appropriate ages
- **Main Barriers to Testing**
 - Forgetting to order the test
 - Families not going to the outpatient lab station to have specimen drawn



Change Up Your Game

- Include **EHR prompts** for ordering lead tests at the 12 and 24 month WCC
- Use **DMHM (Disease Management Health Reminder)** in the EMR so clinical staff can help, and run Arcadia reports to track for missed opportunities
- Consider investing in **Lead Care II point of care blood lead analyzer** so tests can be run in office at time of encounter (reimbursed by all insurers)
- Alternatively, **train staff to collect blood** in office to send on to outpatient lab
- Note: consider ordering a blood lead test at the 18 month visit (tests those infants born in winter who never get a blood lead test in warm weather months when risk of lead exposure is highest; also high risk age group)



Learn From Others in the Playing Field

Golisano Children's Hospital Pediatric Practice

- **2 years ago: only 55%** of patients had at least 1 blood lead test by 2nd birthday though standard of care was to order test at 12, 18 and 24 month WCC
- **Intervention:**
 - Trained medical assistants in phlebotomy for venous draws in clinic
 - Care Managers identify those who are overdue so screening can occur at any visit
- **Result:** Currently, **95%** of patients have been tested for lead at least once by their 2nd birthday
 - **Success** in a high risk population



Know your Coaches

Resources

- WNY Lead Poisoning Resource Center – 276-3105
<https://www.urmc.rochester.edu/childrens-hospital/lead-poisoning-resource-center.aspx>
 - Willing to work directly with practices to improve their lead testing efforts
 - In-service presentations on lead poisoning to providers and staff
 - Management of patients who may have elevated blood lead levels (≥ 5 mcg/dL)
- Arcadia Dashboard, AHP Care Managers



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