



Washington State Department of Health
Prevention and Community Health
Office of Immunization
March 2023

Immunization Strategic Map

2023

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Welcome Message

A new year has arrived and I am excited to share our 2023 Immunization Strategic Map.

As we embark into 2023, this strategic map outlines immunization programmatic goals at DOH over the next year and serves to highlight key objectives and activities in alignment with the Agency's [Transformational Plan](#).

The [mission](#) of the Office of Immunization is to:

- Promote immunization to protect children, teens, and adults from preventable diseases.
- Collaborate with health care providers, government agencies, and community organizations to educate parents on healthy choices and preventive care.
- Increase vaccination coverage across the lifespan by addressing barriers to vaccination to increase accessibility and promote health equity.

This year holds great opportunity for us to align our efforts and focus on meaningful steps to improve our work in immunization. We'll work closely with the COVID-19 Vaccine Program and vaccination partners on 'Forward Planning' to envision what the future could be for our immunization infrastructure beyond 2024 as we emerge from the pandemic with new capacities and lessons learned. This strategic map is our work in motion and can be used as a guide to our goals for the year and areas of focus to lean into and collaborate with peers and partners to achieve.

Our driving priorities in 2023 are to:

- Increase vaccination coverage among children and adults across Washington state by addressing barriers to vaccination to increase accessibility and promote equity,
- Improve communication channels to internal staff & external partners, and
- Engage in a forward planning process to strengthen our immunization infrastructure as we move beyond the COVID-19 pandemic.

We'll strive towards these goals through our collective work across sections and agency, and focus on key vaccines and populations to improve coverage. In this map, each body of work listed includes a description of the mission, goals, and strategies to implement this year.

Thank you to all our dedicated staff across the Department of Health who support saving lives through vaccination and prevention efforts. The work we do is critical to support immunization and the protection of people and communities against vaccine preventable diseases across the state. We have a long road ahead of us in 2023 and will forge our future path together.

Jamilia Sherls-Jones, DNP, MPH, RN, CPN, CDP
Office of Immunization Director

DOH Immunization 2023



Goal

Increase vaccination coverage among children and adults across Washington in line with Healthy People 2030 goals and the Department of Health Transformational Plan (*Health & Wellness, Health Systems & Workforce Transformation, Environmental Emergency Response & Resilience, and Global & One Health*)



Priorities

Priority 1: Address barriers to vaccination to increase accessibility and promote equity include:

- Vaccine hesitancy/Vaccine confidence
 - Cultural
 - Political
 - Limited knowledge of vaccines
 - Mis/Disinformation
 - Lack of Trust/Confidence in vaccines, public health, and healthcare
- Limited physical access to resources that provide vaccines
- Uninsured/Underinsured



Priority 2: Improve communication channels to internal staff and external partners around vaccine updates.

- Monthly Immunization Calls with LHJ Partners
- OI Newsletter/Updates shared with staff and public health partners
- Participation in immunization stakeholder meetings
- OI Equity, Diversity, and Inclusion (EDI) Connection Time - new optional OI staff meeting series to focus on EDI, staff development, seminars



Priority 3: Engage in a forward planning process to strengthen our immunization infrastructure as we move beyond the COVID-19 pandemic.

- Develop teams that are focused on specific bodies of immunization work
- Engage appropriate stakeholders in the process that can provide input
- Support staff transition into new immunization infrastructure



Focus

Vaccines: COVID, Influenza, MMR, IPV, HPV, and Tdap

Populations:

- Children 0-35 months and 4-6 years
- Uninsured/underinsured adults
- Pregnant people
- Refugee/Immigrant/Migrant (RIM) communities
- Residents in Long Term Care (LTC)
- Homebound Individuals
- Black, Indigenous, and People of Color (BIPOC)

Forward Planning - Future State Infrastructure



What is Forward Planning?

Strategic planning, engagement, and resource identification to define the future state of immunization and COVID vaccine infrastructure, in alignment with the Department's transformational goals, as we emerge from pandemic with lessons learned and new capacities.



Goal

Building upon lessons learned from the COVID-19 pandemic, support the development of a well-informed and documented plan to integrate COVID-19 vaccine activities within the agency and further enhance immunization operations with associated timelines.



Strategies

1

Develop teams that are focused on specific bodies of immunization work.

2

Analyze current immunization activities & financials.

3

Communicate and collaborate across teams.

4

Engage appropriate stakeholders in the process that can provide input.

5

Write a proposal that outlines recommendations.

6

Support staff transition into new immunization infrastructure.

” *define the future state of immunization and COVID vaccine infrastructure*

Assessment



Mission

To help others - both within the Agency and externally - access and understand immunization data and analyses to inform efforts for improving vaccination rates, raise awareness of vaccine effectiveness, and identify and understand challenges and opportunities for improving vaccination rates across Washington State.



What we do

Provide epidemiologic and evaluation subject matter expertise in support of Office of Immunization and COVID-19 Vaccine Program efforts; conduct routine immunization surveillance and make data more transparent, accessible, and available to multiple audiences; provide subject matter expertise across the Agency.



GOALS

1

Conduct routine immunization surveillance and reporting. This includes routine childhood, adults, seasonal, and COVID-19 vaccines.

2

Make data accessible and available to multiple audiences.

3

Provide subject matter expertise across the Agency.

4

Maximize utility of data storage and analytic resources.

5

Continue to develop and maintain a Section structure that is highly collaborative and responsive to Office priorities and is mindful of incorporating lessons learned from the pandemic into ongoing work.

6

Contribute to the broader knowledge community about immunization data and Immunization Information System (IIS).

” *identify and understand challenges and opportunities for improving vaccination rates*

Assessment - Strategies

GOAL

1

Conduct routine immunization surveillance and reporting. This includes routine childhood, adults, seasonal, and COVID-19 vaccines.

STRATEGIES

- Identify pockets of un-immunized groups to help prioritize work.
- Monitor vaccination coverage among priority groups in WA. This includes refugee health and schools.
- Develop methodology to determine coverage for specific populations or geographic areas, helping to identify areas of environmental inequity.
- Develop and monitor measures for vaccine equity, to be incorporated into routine work.
- Utilize process and outcome evaluation through lessons learned and demonstrate accountability to develop program improvement.

GOAL

2

Make data accessible and available to multiple audiences.

STRATEGIES

- Produce appropriate data products, i.e., reports, dashboards, etc., to help provide information necessary to better promote health within the community.
- Improve accessibility of immunization data for internal and external partners, and the public.
- Obtain user input and feedback on data products, to ensure they meet equity and inclusion standards.
- Develop and maintain external relationships and provide technical support for external data users (ex. LHJs, researchers).
- Handle data requests: Determine feasibility and priority, manage data sharing agreements, fulfill requests and aid with interpretation.

Transformational Plan Linkages

I. Health & Wellness * II. Health Systems & Workforce Transformation * IV. Emergency Response & Resilience



Assessment - Strategies

GOAL

3

Provide subject matter expertise across the Agency.

STRATEGIES

- Collaborate with other DOH teams on cross-Agency initiatives, including projects integrating immunization data with other data sources.
- Advise teams outside of OI and the COVID-19 Vaccine Program on use and interpretation of immunization data.

GOAL

4

Maximize utility of data storage and analytic resources.

STRATEGIES

- Transition to working in CEDAR environment.
- Seek out training and capacity building to keep up to date on statistical and data management practices that inform immunization data.

GOAL

5

Continue to develop and maintain a Section structure that is highly collaborative and responsive to Office priorities and is mindful of incorporating lessons learned from the pandemic into ongoing work.

STRATEGIES

- Strategize Section structure and focus to meet evolving Office needs and structure.
- Strengthen collaboration across Teams and Sections.
 - Continuing and growing the Methods Workgroup.
 - Developing best practices and strengthening the understanding of SOPs for work (i.e., PBI dashboards, DSAs, Tribal approvals, IRB).
 - Applying lessons learned within the Section and across Sections on data gathering and sharing lessons learned during the COVID pandemic for incorporation into continuing collaboration opportunities.

Transformational Plan Linkages

I. Health & Wellness * II. Health Systems & Workforce Transformation * IV. Emergency Response & Resilience



Assessment - Strategies

GOAL

6

Contribute to the broader knowledge community about immunization data and IIS.

STRATEGIES

- Participate in external opportunities (i.e. workgroups) through organizations such as AIRA, CDC, and AIM.
- Support training and mentorship for interns and fellows.
- Disseminate work through presentations and publications, offering greater transparency to the broader community.

Partners: OI Programs · COVID-19 vaccine program · OPAE · OI Informatics · HTS · OHS · State Epi for Policy and Public Health Practice · Center for Data Science · Communicable Disease Epi · People Services · PCH Policy · CDC · AIM · OSPI · DCYF · LHJs · Tribal Health Leaders and Organizations · AIRA · CSTE · researchers · public · fellow federal grant awardees

Transformational Plan Linkages

I. Health & Wellness * II. Health Systems & Workforce Transformation



Clinical, Quality, and School



Mission

CQS Team will collaborate for Washingtonians across the lifespan and through the healthcare ecosystem to have access to accurate, current information, and be immunized and protected against vaccine-preventable diseases.



What we do

Promote quality improvement to better processes and remove barriers.

Collaborate to ensure equity in preventing and reducing vaccine-preventable diseases.



GOALS

1

Collaborate to provide accessible and timely education, training, technical assistance, resources, and clinical support to internal and external partners.

2

Collaborate with internal and external partners, using innovative best practices.

3

Provide clinical and technical assistance to collaborators utilizing innovative technologies, and maintaining system integrity.

4

Provide clinical support, technical assistance, and outreach for vaccine-preventable disease response.

5

Collaborate to support immunization policy work, WAC/RCW updates and implementation.

” collaborate to ensure equity in preventing and reducing vaccine-preventable diseases

Clinical, Quality, and School - Strategies

GOAL

1

Collaborate to provide accessible and timely education, training, technical assistance, resources, and clinical support to internal and external partners.

STRATEGIES

- Develop and disseminate culturally responsive, audience appropriate, and accessible immunization resources.
- Provide education opportunities via immunization webinars and trainings.
- Review and update materials and web pages.
- Ensure recommendations, guidelines, and images incorporate accurate information in accessible formats & channels.
- Respond timely to immunization questions.
- Provide support and collaborate on immunization quality improvement activities such as IQIP and WACHIP with providers, health systems, long-term care facilities, and other partners.

Partners: Healthcare providers · Clinical and pharmacy partners · LTC/AFH employees · Parents, guardians, caretakers · LHJs · Organizations offering continuing education · School and child care staff

GOAL

2

Collaborate with internal and external partners, using innovative best practices.

STRATEGIES

- Build partnerships with internal and external partners.
- Seek input to improve or identify priorities and strategies.
- Consult with internal and external stakeholders to address vaccine excursions/deviations, and vaccine administration errors.
- Support and encourage schools to transition to School Module.
- Use and maximize technology platforms to enhance immunization rates.
- Develop, administer, meet and exceed immunization benchmarks through award campaigns.

Partners: DCYF · OSPI · WA Federation of Independent Schools · SBOH · SBOE · School and child care staff · School Nurse Leaders · LTCFs · DSHS · Long term care advocacy partners and providers · LHJs · Providers · VAC · Provider associations · Public constituents

Transformational Plan Linkages: I. Health & Wellness * II. Health Systems & Workforce Transformation * IV. Emergency Response & Resilience * V. Global and One Health



Clinical, Quality, and School - Strategies

GOAL

3

Provide clinical and technical assistance to collaborators utilizing innovative technologies.

STRATEGIES

- Review systems to ensure equitable access.
- Evaluate system accuracy and track issues and enhancements.
- Identify and address gaps, and improve technology usage to ensure equal access to public health programs or services.

Partners: Healthcare providers · LHJs · STC consortium · Public constituents · PrepMod users · WAIS users · School and child care staff · Regional IQIP Coordinators · Collaborators · CoCASA · CDC

GOAL

4

Provide clinical support, technical assistance, and outreach for vaccine-preventable disease response.

STRATEGIES

- Respond to vaccination needs through collaboration with LHJs and other partners.
- Educate and advocate for autonomy and informed vaccine choice based on clinically sound, accurate information.
- Coordinate, arrange, and improve access to vaccinations to disproportionately affected individuals to increase vaccine equity.
- Review and assist with development of immunization materials, webpages, and articles.

Partners: LHJs · Healthcare providers · Public constituents · STC Consortium · CDC · other states · Faith-based and community-based organizations · Schools and childcares · Long term care and advocacy groups · Care-a-Van

Transformational Plan Linkages: I. Health & Wellness * II. Health Systems & Workforce Transformation *
IV. Emergency Response & Resilience * V. Global and One Health



Clinical, Quality, and School - Strategies

GOAL

5

Collaborate to support immunization policy work, WAC/RCW updates and implementation.

STRATEGIES

- Educate, train, provide technical assistance, and develop resources for rule compliance.
- Create and update vaccine requirement charts for school/childcare.
- Ensure equitable access to linguistically and culturally appropriate resources.
- Engage with communities regarding implementation of rule changes.
- Promote and share CDC/ACIP recommendations.
- Assess and address gaps in immunization policies.

Partners: DOH policy staff · School child care staff · OSPI · DCYF · Tribal partners · VAC · Nurse leaders · CDC/ACIP · SBOE · SBOH · Public constituents · DSHS · Long term care and advocacy groups

Transformational Plan Linkages: I. Health & Wellness * II. Health Systems & Workforce Transformation *
IV. Emergency Response & Resilience * V. Global and One Health



Health Promotion & Education



Mission

Provide guidance and assistance with health education activities throughout the agency. Use research-based practices to engage and develop programs, create audience-specific strategies, and help with materials that educate and influence positive health behaviors for all populations.



What we do

Help by creating or improving educational and outreach materials, so that DOH shares the right messages in the right way, with the right audiences.



GOALS

1

Provide high-quality, equitable health education materials and resources.

2

Collaborate with internal and external partners, utilizing evidence-based and innovative best practices.

3

Provide subject matter expertise across the Agency.

”

Use research-based practices to engage and develop programs, create audience-specific strategies, and help with materials that educate and influence positive health behaviors

Health Promotion & Education - Strategies

GOAL

1

Provide high-quality, equitable health education materials and resources.

STRATEGIES

- Collaborate with programs and partners to ensure materials and resources meet CLAS standards.
- Collaborate with OI to identify communities and populations with barriers to access or lower rates of vaccinations.
- Ensure equitable access to vaccine information focusing on populations that have lower vaccinations and experience greater vaccine hesitancy.

GOAL

2

Collaborate with internal and external partners, utilizing evidence-based and innovative best practices.

STRATEGIES

- Cultivate and maintain relationships with external agencies and partners.
- Serve as a liaison between OI and partners on the evidence-based or evolving vaccine and immunization education best practices and behavior change.
- Promote health promotion through offering a variety of services and audience specific strategies to educate and engage communities (i.e., material development, support accessing translations, program planning, etc.).
- Create educational materials for providers and other stakeholders on the vaccine and related topics.

GOAL

3

Provide subject matter expertise across the Agency.

STRATEGIES

- Serve as a subject matter expert for best practices on advancing vaccine and immunization education and behavior change.
- Assist with developing strategies to address vaccine mis/disinformation and vaccine hesitancy.
- Create talking points and messaging for OI leadership/external partners related to vaccine education and information such as re-emerging/emerging vaccine-preventable illness and disease, childhood immunization rates etc.

Partners: RAIOS · VAC · IACW · HPV Task Force · LHJs · NAICP · DSHS · SNOW · OSPI · DCYF · WSMA WCAAP WSHA · State Wellness Committee · Governor's Office · CDC Region X · University of Washington · Immunize.org · Voices for Vaccines · National Resource Center for Refugees, Immigrants, and Migrants · Nashi Health Board · C+C · HCA · WithinReach · Desautel Hege

Transformational Plan Linkages: I. Health & Wellness * II. Health Systems & Workforce Transformation * III. Environmental Health * IV. Emergency Response & Resilience * V. Global and One Health



Immunization Information System

Mission

Support the development, functionality, availability and maintenance of the Washington Immunization Information System as a tool to promote healthy families and protect against vaccine-preventable diseases.



What we do

Lead system technical support, user training, functionality improvements, interoperability and stakeholder assistance for the state's immunization information system and its secondary applications.



GOALS

1 Provide excellent customer service.

2 Continuously update and improve system functionalities.

3 Incorporate diversity, equity, and inclusion (DEI) measures within the IIS team.

4 Expand PrepMod to CVP Clinics.

5 Build a sustainable program.

6 Improve data accuracy and completion.

” *tool to promote healthy families and protect against vaccine-preventable diseases*

Immunization Information System - Strategies

GOAL

1

Provide excellent customer service.

STRATEGIES

- Respond to all inquiries within 72 business hours.
- Implement electronic signature for ISA by the end of 2023.
- Emphasize improvement on the user experience for consumer applications (MyIR Mobile and WA Verify).
- Update IIS training webinars and guides by the end of 2023.
- Bimonthly meetings with Tier-1 Helpdesk to foster collaboration and update Tier-1 Q/A on a quarterly basis.
- Continue to improve knowledge base of the IIS and new modules (VOMS 2.0, IQ, IQIP).

GOAL

2

Continuously update and improve system functionalities.

STRATEGIES

- Allocate funding specific to system maintenance and enhancements such as the school module.
- Participate in AIRA workgroups to learn and help improve standards and best practices.
- Host bimonthly oversight meetings to explore IIS improvement initiatives, revisit team charter, release testing expectations, discuss bug ticket reporting and prioritize processes, etc.
- Meet regularly with IIS managers across the STC consortium on Fridays.
- Conduct GAP analysis and initiate projects to meet functional standards & requirements, traceability matrix and AART compliance.
- Complete SAW/SSO integration and deployment of SSO dependent modules (VOMS 2.0, IQ, IQIP).
- Stay current with system releases and deploy modernized modules to utilize available functionality more fully.

Partners: : AIRA, AIM, WSHA, Provider Associations, LHJs, OIT, OPAE, Healthcare Organizations, CDC NCIRD/IIS Branch, STChealth, STC Consortium, Healthcare Authority, Health Plans, Tribal Governments, State Agencies

Transformational Plan Linkages: I. Health & Wellness * II. Health Systems & Workforce Transformation *
IV. Emergency Response & Resilience * V. Global and One Health



Immunization Information System - Strategies

GOAL

3

Incorporate diversity, equity, and inclusion (DEI) measures within the IIS team.

STRATEGIES

- Connect to RIISE (Refugee IIS Exchange) via IZ Gateway.
- Continued support for Care-a-van clinics to service underrepresented communities.
- Allocate time for staff members to participate in DEI events and for DEI members to provide updates during IIS RoundTable meetings.
- Identify & establish relationships with equity partners.
- Expand access to data via operational and CEDAR data flows.
- Provide alternative HL7 solutions for smaller providers with resource & cost constraints.
- Volunteer to mentor fellows or interns and provide experience for future healthcare leaders.
- Work with STC to improve accessibility of the IIS to better align with current Web Content Accessibility Guidelines.

GOAL

4

Expand PrepMod to CVP Clinics.

STRATEGIES

- Complete security review and health information exchange (HIE) connection.
- Develop timeline and statement of work (SOW).

GOAL

5

Build a sustainable program.

STRATEGIES

- Apply for grants pertaining to IIS funding.
- Work with Financial Systems team on Medicaid funding.
- Advocate for the IIS in the concept papers.
- Develop cost-recovery model for data requests.
- Discovery sessions for utilizing PrepMod ReadBilling for DOH clinic reimbursement.
- Develop a training strategy for new employees within the IIS team to help maximize success and retain staff.

Partners: : AIRA, AIM, WSHA, Provider Associations, LHJs, OIT, OP&E, Healthcare Organizations, CDC NCIRD/IIS Branch, STChealth, STC Consortium, Healthcare Authority, Health Plans, Tribal Governments, State Agencies

Transformational Plan Linkages: I. Health & Wellness * II. Health Systems & Workforce Transformation *
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Immunization Information System - Strategies

GOAL

6

Improve data accuracy and completion.

STRATEGIES

- Utilize data quality reports to provide outreach and technical support to organizations regarding immunization data submitted to the IIS.
- Develop vaccine scorecards beyond COVID-19.
- Potentially expand Vaccine Record Update Program to other data fields.
- Support the Vaccine Management Team with the expansion of the Adult Vaccine Program (AVP).
- Share all de-identified data (DID) to CDC via PPRL.
- Review and update interface monitoring processes during onboarding of providers and on-going in production.
- Implement IQ & Smarty.
- Promote IZ Gateway connections with external jurisdictions, including Oregon and Idaho.

Partners: : AIRA, AIM, WSHA, Provider Associations, LHJs, OIT, OPAE, Healthcare Organizations, CDC NCIRD/IIS Branch, STChealth, STC Consortium, Healthcare Authority, Health Plans, Tribal Governments, State Agencies

Transformational Plan Linkages: I. Health & Wellness * II. Health Systems & Workforce Transformation *
IV. Emergency Response & Resilience * V. Global and One Health





Mission

Support a robust infrastructure of immunization data systems and transform data into usable information to support vaccine allocation, administration, management, surveillance, assessment, and reporting.



What we do

Monitor, assess and improve data quality; develop and enhance data linkages; provide process improvement, data management and technical support; identify data system needs and collaboratively champion solutions to meet those needs; maintain immunization data governance; facilitate data access and use of interoperable data solutions.



GOALS

1

Increase Office of Immunization's analytic and reporting capabilities.

2

Upgrade and improve existing analytic immunization data flows.

3

Maintain high-quality, uniform, and integrated immunization data.

4

Address opportunities for immunization data, analytic, and reporting improvements.

5

Contribute to the development of and encourage adherence to an organizational data governance framework for establishing consistent standards and best practices pertaining to immunization related data.

” *develop, maintain, operate, and enhance immunization-related data systems*

Informatics - Strategies

GOAL

1

Increase Office of Immunization's analytic and reporting capabilities.

Maintaining and growing an interoperable, accessible client-side, cloud-based data resource, CEDAR.

STRATEGIES

- Create and disseminate Immunization Data Quality and Analytic Guide for Office of Immunization CEDAR tables. [OI, CEDAR CoP]
- Provide the ability for users to address correct and geocode to specific geographic locations. [ESRI, Multiple LHJs, Tribes, Schools, OIT, CEDAR CoP]
- Create guidance documentation and tools to ease onboarding to CEDAR environment for Immunizations reporting and analysis. [CEDAR CoP]
- Provide best practices for creating and deploying new jobs and workflows in CEDAR. [CEDAR CoP]

Partners: CEDAR Community of Practice · LHJs · Tribal Partners · Schools · OIT

GOAL

2

Upgrade and improve existing analytic immunization data flows.

Using modern pipelines to enable automation, consistency, quality assurance, well-structured transformations, and broader end-use integration in CEDAR.

STRATEGIES

- Create, implement, and maintain regular monitoring of analytic pipelines. [DSSU, CEDAR CoP]
- Conduct quality assurance testing of new analytic pipelines.
- Create new analytic pipelines to reduce and streamline manual processing of external data. [CDC, CEDAR CoP, DSSU, OI]
- Work with customers to migrate existing workflows to CEDAR without interrupting production output.
- Provide technical support, troubleshooting, and technical solutions for teams shifting existing workflows to CEDAR. [OI, CEDAR CoP]

Partners: Center for Data Science · CEDAR Community of Practice · CDC

Transformational Plan Linkages: II. Health Systems & Workforce Transformation * III. Environmental Health * IV. Emergency Response & Resilience * V. Global and One Health



Informatics - Strategies

GOAL

3

Maintain high-quality, uniform, and integrated immunization data.

STRATEGIES

Utilizing active cleansing, data profiling, process improvements, and shared standards. Implement and maintain quarterly COVID-19 Provider Data Quality Scorecards. [Vaccine providers, medical associations]

- Implement and maintain internal COVID-19 Provider Data Quality dashboard. [COVID-19 Vaccine Program]
- Maintain and improve existing patient line lists and reports for IIS section. [Vaccine providers]
- Integrate multiple data sources to inform evidence-based decisions regarding vaccine equity and distribution. [OI, LHJs]
- Identify innovative ways to link disparate data sources to inform business operations and evaluate programmatic activities. [AIRA]

Partners: Vaccine Providers · Medical Associations · COVID-19 Vaccine Program · LHJs · AIRA

GOAL

4

Address opportunities for immunization data, analytic, and reporting improvements.

STRATEGIES

- Develop, maintain, and enhance standalone technical solutions.
- Provide business analysis, solutions engineering, and subject matter support.
- Perform process, data, and systems modeling.
- Elicit and document business requirements.
- Inclusively develop user interfaces and reporting to ensure syntax, graphics, and information architecture is useful, meaningful, and appropriate for all ends users.

Partners: COVID-19 Vaccine Program · REDCap Office · LHJs · Childhood Vaccine Program

Transformational Plan Linkages: II. [Health Systems & Workforce Transformation](#) * III. [Environmental Health](#) * IV. [Emergency Response & Resilience](#) * V. [Global and One Health](#)



Informatics - Strategies

GOAL

5

Contribute to the development of and encourage adherence to an organizational data governance framework for establishing consistent standards and best practices pertaining to immunization related data.

Support compliance with established internal regulations for immunization data collection, use, storage, and sharing.

- Review, compile and maintain established internal regulations in a centralized, accessible location. [OI, OAS, OIT]

STRATEGIES

Assess current immunization data governance landscape to help inform the development and implementation of an enterprise-wide data governance framework.

- Create a holistic, immunization data catalog with automated data discovery, sensitive data classification, and end-to-end data lineage, for all Immunization related data tables in CEDAR. [CEDAR Program, CEDAR CoP, OI, OIT]
- Create a set of shared immunization data definitions. [OI, OIT]
- Organize and maintain up-to-date listing and definitions/expectations of data stewards, custodians, SMEs associated with immunization data assets.

Partners: OAS · OIT · CEDAR Program · CEDAR Community of Practice

Transformational Plan Linkages: II. Health Systems & Workforce Transformation * III. Environmental Health * IV. Emergency Response & Resilience * V. Global and One Health



Operations



Mission

Provide a foundation to support programmatic work in the Office. Collaborate with office, division, and agency leadership to ensure compliance with administrative, financial, contractual, and federal grant requirements. Assess and implement process improvement strategies to align with agency goals and objectives.



What we do

Lead office operations, including financial and grant management, fiscal and contract monitoring, grant reporting, constituent support, and internal administrative operations, procedures, and efficiencies.



GOALS

1

Collaborate with team members to provide clear, consistent, and timely messaging to internal and external partners, including customers, local health agencies, health care providers, agency staff, and other partners.

2

Identify and implement efficiencies and cost effectiveness for internal operations.

3

Assure compliance with federal grant requirements.

4

Maintain fiscal monitoring and financial management of state and federal funds.

”

a company can seize extra-ordinary opportunities only if it is very good at the ordinary operations

-Marcel Telles

Operations - Strategies

GOAL

1

Collaborate with team members to provide clear, consistent, and timely messaging to internal and external partners, including customers, local health agencies, health care providers, agency staff, and other partners.

STRATEGIES

- Maintain the highest level of excellent customer service.
- Sustain a call center to answer all incoming phone calls during standard business hours.
- Respond to voice mails within 24 hours.
- Respond to incoming emails within 48 hours.
- Respond to vaccine record requests within 72 hours.
- Provide timely triage of inquiries to subject matter experts.
- Provide Spanish-speaking call center representatives.
- Provide subject matter expertise on processes to obtain childhood vaccine records required for school entry.

GOAL

2

Identify and implement efficiencies and cost effectiveness for internal operations.

STRATEGIES

- Identify, prioritize, and conduct process improvement efforts.
- Review requirements, functions and staffing to assure effectiveness and responsiveness.
- Explore efficiencies in systems, use of funds, and resource management.
- Ensure staff development regarding new and existing contract requirements, best practices, etc.

GOAL

3

Assure compliance with federal grant requirements.

STRATEGIES

- Clarify existing grant writing process and make improvements where appropriate.
- Participate in immunization calls with funders and contractors.
- Collect, compile, and submit deliverable reports.
- Develop and maintain expertise on fiscal management of federal funding.
- Ensure staff have a clear understanding of changes in grant requirements.

Operations - Strategies

GOAL

4

Maintain fiscal monitoring and financial management of state and federal funds.

STRATEGIES

- Collaborate with division and agency financial staff to prepare monthly, quarterly, and annual financial reports.

Partners: DOH agency financial, contract, and grants management staff · LHJs · Health Care Authority · CDC · health care providers · public constituents · COVID program leadership · OPAE · Watch Me Grow · PCH policy team · People Services (HR) · OIT · FPHS · DLT

Transformational Plan Linkages: I. Health & Wellness * II. Health Systems & Workforce Transformation *
IV. Emergency Response & Resilience * V. Global and One Health



Vaccine Management



Mission

Assure children and adults in Washington State have access to publicly funded vaccines by maintaining a network of providers who administer vaccine to eligible populations.



What we do

The Vaccine Management Team purchases vaccines with the appropriate fund types and in sufficient quantities, ensuring vaccines are ordered, distributed, stored, and handled appropriately to preserve vaccine viability necessary to protect individuals and communities against vaccine-preventable diseases.



GOALS

1

Transition COVID vaccine into CVP and AVP.

2

Identify providers working with underserved communities and provide outreach and education regarding childhood and adult vaccine programs.

3

Develop a provider customer management database to support program operations.

4

Perform quality assurance measures to ensure vaccine programs are properly implemented.

5

Proactively identify opportunities to provide education and training to providers and Local Health Jurisdictions to create a strong foundational knowledge of program requirements that will reduce vaccine waste and loss.

6

Create standardization and efficiencies in provider vaccine ordering activities.



assure children and adults in Washington State have access to publicly funded vaccines

Vaccine Management - Strategies

GOAL

1

Transition COVID vaccine into CVP and AVP.

STRATEGIES

- Conduct assessment to identify providers interested in transitioning from COVID Vaccine Program to Childhood Vaccine Program (CVP) and/or Adult Vaccine Program (AVP).
- Identify providers not enrolled with CVP and/or AVP and facilitate enrollment training and support with next steps in the process.
- Work collaboratively within the COVID Commercialization Forward Planning workgroups to identify and implement the steps necessary for a seamless transition of COVID vaccine to CVP and AVP.

Partners: COVID team · Healthcare providers · LHJ · Pharmacy Association · Hospital Association

GOAL

2

Identify providers working with underserved communities and provide outreach and education regarding childhood and adult vaccine programs.

STRATEGIES

- Conduct a gap analysis to determine where there is a gap in immunization services.
- Identify non-traditional sites such as pharmacies who may be able to fill identified gaps in immunization access.
- Collaborate with OPAE workforce fellows to learn more about vaccine services provided in detention/correctional facilities.

Partners: COVID team · Informatics team · HTS

Transformational Plan Linkages: I. Health & Wellness * II. Health Systems & Workforce Transformation *
IV. Emergency Response & Resilience * V. Global and One Health



Vaccine Management - Strategies

GOAL

3

Develop a provider customer management database to support program operations.

STRATEGIES

- Collaborate with COVID and Informatics sections to define database needs and obtain necessary approvals.
- Identify software system that will best support program requirements.
- Integrate AVP provider agreement into database.

Partners: COVID team · Informatics team · HTS

GOAL

4

Perform quality assurance measures to ensure vaccine programs are properly implemented.

STRATEGIES

- Identify areas for improvement and streamline internal process to better serve external providers.
- Update current Operations Guide with recent policy updates and programmatic changes.

Partners: CDC · LHI regional representatives · HCA · WVA

GOAL

5

Proactively identify opportunities to provide education and training to providers and Local Health Jurisdictions to create a strong foundational knowledge of program requirements that will reduce vaccine waste and loss.

STRATEGIES

- Identify trends and opportunities for regional representatives to provide preventative education and training at site visits.
- Create a robust New Coordinator required training and create a workflow that identifies new staff.
- Leverage New Coordinator training modules to also serve providers who need corrective training.
- Continue the successful monthly CVP Provider Training series.
- Assess the need to translate CVP program materials for providers.

Partners: IIS Training team · Clinical team · LHI regional representatives · TRAIN · OPAE health educators and web team

Vaccine Management - Strategies

GOAL

6

Create standardization and efficiencies in provider vaccine ordering activities.

Analyze feasibility of transitioning AVP vaccine ordering to IIS in lieu of current survey.

- Standardize AVP PINs and provider enrollment/re-enrollment process.
- Assign all AVP providers the “Adult Vaccine Program” status in the IIS.
- Develop AVP order sets in IIS and establish process for order approval.
- Refine AVP transfer process and accountability tracking.

STRATEGIES

Investigate feasibility of additional ordering opportunities for AVP.

Review economic order quantity-assigned order frequency & timing (EOQ) and recommended order quantity (ROQ) processes.

- Analyze current provider ordering practices vs. EOQ and ROQ including number of provider orders off schedule, volume of orders in first half of month vs. second half of month, days between order submissions and order approval.
- Determine if there are opportunities to improve provider experience and find efficiencies.

Develop routine quality assurance measures for vaccine order approval and accountability tracking (similar to audit process) to help identify staff knowledge gaps or areas for process improvements.

Partners: Assessment team · IIS team · Enrolled healthcare providers · COVID team · Data exchange · LHI

Transformational Plan Linkages:

I. Health & Wellness * II. Health Systems & Workforce Transformation * IV. Emergency Response & Resilience



VPD Surveillance, Vaccine Safety, & Perinatal Hepatitis B



Mission

Collaborate with OCDE to assure implementation of immunization cooperative agreement requirements are met for vaccine-preventable disease (VPD) surveillance and outbreak response and the Perinatal Hepatitis B (PHB) Prevention Program.

OI to assure provider education on vaccine safety systems and VAERS reporting, and monitoring of vaccine safety data.



” assure implementation of VPD surveillance, perinatal hepatitis B prevention, and vaccine safety education and monitoring

GOALS

- 1 Conduct surveillance and support capacity to identify, control, and prevent VPD cases and/or outbreaks.
- 2 Ensure VPD cases and/or outbreaks are reported to local/state public health officials and case notifications are provided to CDC.
- 3 Encourage health care provider VAERS reporting, and monitor VAERS and vaccine safety data.
- 4 Identify HBsAg-positive pregnant women and births to HBsAg-positive women.
- 5 Ensure hepatitis B virus (HBV)-exposed newborns receive postexposure prophylaxis (PEP) per ACIP recommendations.
- 6 Ensure HBV-exposed infants complete the hepatitis B vaccine series and receive postvaccination serologic testing (PVST) per ACIP recommendations.
- 7 Determine future technology options for PHBPP case management and documentation.

VPD Surveillance, Vaccine Safety, & Perinatal Hepatitis B

GOAL

1

Conduct surveillance and support capacity to identify, control, and prevent VPD cases and/or outbreaks.

STRATEGIES

- Implement and maintain surveillance systems to investigate and document cases and/or outbreaks of VPDs, and ensure appropriate clinical specimens are tested and relevant epidemiologic information is collected.
- Implement appropriate public health activities for the control and prevention of VPD cases and outbreaks in accordance with the CDC Manual for the Surveillance of VPDs.
- Develop and provide trainings and webinars on VPD case identification, transmission, control, and reporting to local health jurisdictions, tribal partners, and healthcare providers in the state.

GOAL

2

Ensure VPD cases and/or outbreaks are reported to local/state public health officials and case notifications are provided to CDC.

STRATEGIES

- For case and outbreak surveillance of VPDs, collaborate with appropriate staff to submit timely and complete data to appropriate public health authorities.
- Assess timeliness and completeness of each case and/or outbreak investigation, reporting and notification for VPDs that are nationally notifiable and reportable in the jurisdiction. Monitor the quality of VPD surveillance by reviewing surveillance data and indicators.
- OCDE to ensure all cases of VPDs are reported to the National Notifiable Disease (NNDSS) via the Washington State Disease Reporting System (WDRS).
- Notify CDC about measles index cases by phone within 24 hours of confirming the case.
- Validate that surveillance indicator data entered into WDRS will be submitted to NNDSS and conduct validation assessments to ensure surveillance indicators are transmitted correctly.
- For Haemophilus Influenza and meningococcal invasive disease, monitor vaccine status of all cases, and review serotype or serogroup results, and epidemiologic information for indications that cases might be linked and/or need further molecular testing to detect clusters for reporting to CDC. Discuss all clusters with epidemiologists at the CDC NCIRD Division of Bacterial Diseases when they occur.

Partners: OCDE · OHS · LHJ · Tribal Health · healthcare providers · laboratories · CDC



Transformational Plan Linkages: II. [Health Systems & Workforce Transformation](#) *
IV. [Emergency Response & Resilience](#) * V. [Global and One Health](#)



VPD Surveillance, Vaccine Safety, & Perinatal Hepatitis B

GOAL

3

Encourage health care provider VAERS reporting, and monitor VAERS and vaccine safety data.

STRATEGIES

- Designate staff to coordinate VAERS and vaccine safety activities and serve as CDC's main point-of-contact for vaccine safety activities in the awardee's jurisdiction.
- Alert CDC to vaccine safety concerns by reporting them to CDC Immunization Safety Office or CDC EOC.
- Collaborate with CDC and other partners to respond to and investigate reports of serious adverse events and other vaccine safety issues of concern in accordance with state policy.
- Encourage and facilitate VAERS reporting of adverse events that occur after vaccination as well as vaccine administration errors.
- The Vaccine Safety Coordinator will alert DOH leadership, affected local health jurisdiction, and CDC to vaccine safety concerns following CDC guidance within 24 hours of notification.
- The Vaccine Safety Coordinator will work with relevant partners (CDC, State, Local Health, Health Care Providers, Health Care Facilities) to respond to investigations of serious adverse events, as requested by CDC or the State.
- The Vaccine Safety Coordinator will provide education on vaccine safety and VAERS reporting and promote VAERS reporting in the IIS in webinars, newsletters, and website content by June 30. (awardee defined)
- The Vaccine Safety Coordinator will communicate resources and trainings available to providers via the office newsletter and work with DOH provider association contacts to share this information by June 30. (awardee defined)
- Health Promotion team will explain and promote VAERS as appropriate in publications, social media, and on DOH website annually, by June 30.

Partners: Medical associations · LHJ · Tribal Health · healthcare providers · CDC



VPD Surveillance, Vaccine Safety, & Perinatal Hepatitis B

GOAL

4

Identify HBsAg-positive pregnant women and births to HBsAg-positive women.

STRATEGIES

- Monitor surveillance systems and other data sources to identify HBsAg-positive pregnant women and births to HBsAg-positive women.
- PHBPP staff will review PHB module monthly to ensure all contracted LHJs have entered/updated case information.
- PHBPP staff will increase the number of LHJ coordinator calls to support an environment to share best practices for case identification during the budget period.
- Maintain hepatitis B profile for WA State, to understand the prevalence, and to explore how surveillance for acute, chronic, and perinatal hepatitis B can be better coordinated using the profile to identify hepatitis B positive pregnant women.
- Contract with LHJs to implement the Perinatal Hepatitis B Prevention Program (PHBPP) at the local level, including all PHBPP program requirements during the budget period.

GOAL

5

Ensure hepatitis B virus (HBV)-exposed newborns receive postexposure prophylaxis (PEP) per ACIP recommendations.

STRATEGIES

- Collaborate with birthing facilities to develop, strengthen, or maintain policies and procedures to prevent missed opportunities for post-exposure prophylaxis.
- Provide education to HBsAg-positive pregnant women identified prenatally on how the newborn will be medically managed to prevent mother-to-infant transmission of hepatitis B.
- Create list of birthing facilities and primary contact information statewide.
- Initiate needs assessment including documenting existing PHB related protocols and post-exposure prophylaxis policies for birthing facilities.
- Collaborate with health educators to create or modify materials for education around preventing mother-to-infant transmission by stressing the importance of the hepatitis B birth dose.
- Collaborate with LHJ case managers to identify ways to provide education to hepatitis B positive women.

Partners: OCDE · OHS · LHJ · refugee health · birthing hospitals · healthcare providers · laboratories · CDC



Transformational Plan Linkages: II. [Health Systems & Workforce Transformation](#) *
IV. [Emergency Response & Resilience](#) * V. [Global and One Health](#)



VPD Surveillance, Vaccine Safety, & Perinatal Hepatitis B

GOAL

6

Ensure hepatitis B virus (HBV)-exposed newborns receive postexposure prophylaxis (PEP) per ACIP recommendations.

STRATEGIES

- Provide case management services for HBV-exposed infants until hepatitis B vaccine series is completed with all valid doses and post-vaccination serologic testing has been performed.
- Monitor case action report within the perinatal hepatitis B module monthly to follow-up with contracted LHJs who have cases requiring updates (e.g., vaccine, PVST, closed to completion, etc.).
- Contract with local health jurisdictions to provide Perinatal Hepatitis B case management services to birthing hospitals and health care providers to prevent perinatal hepatitis B infection.

Partners: OCDE · OHS · LHJ · refugee health · birthing hospitals · healthcare providers · laboratories · CDC

GOAL

7

Determine future technology options for Perinatal Hepatitis B Prevention Program case management and documentation.

STRATEGIES

- Assess program practices in other awardee locations.
- Propose options for technology solutions for PHB case management.
- Seek leadership guidance and support for solution selection and implementation.

Partners: DCHS · OIT · STC · LHJ



Transformational Plan Linkages: II. Health Systems & Workforce Transformation *
IV. Emergency Response & Resilience * V. Global and One Health



Community Relations & Equity



Mission

Ensure public health programs are equitably focused on all state residents, with an emphasis on disproportionately impacted communities.



GOALS

1

Provide mobile health services to those communities with the highest risk for negative health outcomes, the highest barriers to accessing healthcare, and the lowest vaccine uptake rates.

2

Adjust to changing public health threats.

” *Ensure public health programs are equitably focused*



Community Relations & Equity

GOAL

1

Provide mobile health services to those communities with the highest risk for negative health outcomes, the highest barriers to accessing healthcare, and the lowest vaccine uptake rates.

STRATEGIES

- Use data regarding priority vaccine distribution areas and equity gaps for vaccine initiation to direct outreach to:
 - communities with SVIs of 7 or greater
 - BIPOC communities
 - rural areas
 - those with lower vaccination rates
 - groups at higher risk of contracting disease
 - areas where Care-a-Van has not yet provided services
- Collaborate with trusted community organizations to deliver culturally and linguistically appropriate services.
- Work to alleviate barriers to accessing health services and promote resilience.
- Improve DOH visibility, community trust, and contribute to a positive perception of public health's value.
- Evaluate how we have met these goals through post-clinic surveys, community organizations that hosted clinics, surveys given to community members who have been given immunizations at Care-a-Van clinics, and data gathered through PrepMod.

Partners: WAHS · PrepMod · LHJs · Medical Providers/Contractors · WIC · Community Engagement · HCA · insurance · rural resources · Houses of Faith · Organizations serving refugees, immigrants, and migrants · Organizations serving those in poverty · Organizations serving BIPOC communities · Organizations serving people living in areas with high SVIs · Organizations serving people with higher risk of negative health outcomes such as seniors and those living in congregate settings · Organizations that reach those with lower vaccination rates such as children, youth, and young adults.

GOAL

2

Adjust to changing public health threats.

STRATEGIES

- Determine how Care-a-Van can remain able to adapt as community level of disease and type of infection change, new or updated vaccine presentations (e.g., the release of a new respiratory syncytial virus (RSV) vaccine) become available, and new and emerging public threats such as measles change the demand and availability of vaccines.

Partners: HCA · OSPI · BOE · DCYF · OI · WIC

Transformational Plan Linkages: I. Health & Wellness * IV. Emergency Response & Resilience * V. Global and One Health



Staff Development



Mission

To equip OI Leadership Team and staff with resources and trainings to continuously develop skills that are necessary to achieve Agency, Division and Office goals and Objectives.



Goal

In 2023, at least 50% of OI staff will complete at least one non-mandatory training for skill development.



Objectives

1

Assess skill development trainings of interest among OI staff.

2

Leadership shares internal/ external training opportunities.

3

Create equitable process for determining attendance at conferences and trainings.

” *resources and trainings to continuously develop skills that are necessary to achieve*

Staff Development

GOAL

1

Assess skill development trainings of interest OI staff.

STRATEGIES

- Develop survey that assesses which trainings/resources would be of interest.
- Section managers or supervisors disseminate surveys in each OI section.
- Surveys are evaluated, and top 3 training needs are identified.
- Leadership team plans trainings or identifies resources to meet training needs.

GOAL

2

Provide staff with internal/external training and professional development opportunities.

STRATEGIES

- Identify leadership opportunities for staff.
- Increase staff skill through trainings and mentoring.
- Provide support for staff to complete agency and CDC required training.
- Develop a standard office-level new employee orientation program.
- Developmental trainings are shared via email, Teams, or announced during team meetings. Leadership team to determine relevancy of employee's selected training and provides space for employee to attend.

GOAL

3

Create equitable process for determining attendance at conferences and trainings.

STRATEGIES

- Assess processes in other PCH Offices.
- Provide drafts of processes for OI staff to provide feedback on.
- Leadership team will select and implement a process that works best for OI.

Partners: The Leneker Team · CDC · NFID · AIRA · AIM



Acronyms

- AART:** Aggregate Analysis Reporting Tool
- ACIP:** Advisory Committee on Immunization Practices
- AIM:** Association of Immunization Managers
- AIRA:** American Immunization Registry Association
- BIPOC:** Black, Indigenous, and People of Color
- BOE:** Board of Education
- CDC:** Centers for Disease Control and Prevention
- CEDAR:** Cloud Environment for Data Analytics and Reporting
- CLAS:** Culturally and Linguistically Appropriate Services
- CoCASA:** Comprehensive Clinic Assessment Software Application
- CoP:** Community of Practice
- DCHS:** Division of Disease Control and Health Statistics (at Washington State Department of Health)
- DCYF:** Washington State Department of Children, Youth, and Families
- DOH:** Washington State Department of Health
- DSAs:** Data Sharing Agreements
- DSHS:** Washington State Department of Social and Health Services
- DSSU:** Data Science Support Unit
- ESRI:** Environmental Systems Research Institute, Inc.
- HBsAg:** Hepatitis B surface antigen
- HCA:** Washington State Health Care Authority
- HL7:** Health Level Seven
- HTS -** Health Technology Services
- IACW:** Immunization Action Coalition of Washington
- IIS:** Immunization Information System
- IQ:** Name of a product (stchealth.com/iq-2)
- IQIP:** Immunization Quality Improvement for Providers
- IRB:** Institutional Review Board
- ISA:** Interoperability Standards Advisory
- LHJ:** Local Health Jurisdiction
- LMS:** Learning Management System
- MyIR:** My Immunization Record
- NAICP:** National Adult Immunization Coordinators' Partnership
- NCIRD:** National Center for Immunizations and Respiratory Diseases
- NFID:** National Foundation for Infectious Disease

Acronyms - continued

OCDE: Office of Communicable Disease Epidemiology at Washington State Department of Health
OHS: Executive Office of Health and Science at Washington State Department of Health
OI: Office of Immunization at Washington State Department of Health
OIT: Executive Office of Innovation and Technology at Washington State Department of Health
OPAE: Office of Public Affairs and Equity at the Washington State Department of Health
OSPI: Washington Office of Superintendent of Public Instruction
PBI: Power BI
PCH: Division of Prevention and Community Health at Washington State Department of Health
PPRL: Privacy-preserving Record Linkage
PrepMod: Washington State's Mass Vaccination System
RAIOs: Recognized American Indian Organizations
RCW: Revised Code of Washington
RIISE: Refugee Immunization Information Systems Exchange
RSV: Respiratory Syncytial Virus
SAW: Secure Access Washington
SBOH: Washington State Board of Health
SBOE: Washington State Board of Education
SNOW: School Nurse Organization of Washington
SSO: Single Sign On
STC: STC Health – Scientific Technologies Corporation, an immunization information system vendor
SVI: Social Vulnerability Index
TRAIN: learning management system, offering CDC developed learning opportunities
VAC: Vaccine Advisory Committee
VAERS: Vaccine Adverse Event Reporting System
VOM: Vaccine Ordering Module
VPD: Vaccine Preventable Disease
WAC: Washington Administrative Code
WACHIP: Washington Child Health Improvement Project
WCAAP: Washington Chapter of the American Academy of Pediatrics
WIC: Supplement Nutrition Program for Women, Infants, and Children
WSHA: Washington State Hospital Association
WSMA: Washington State Medical Association
WVA: Washington Vaccine Association



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