

## QUALITY IMPROVEMENT STORY BOARD 9/27/12



Public Health

## WHATCOM COUNTY HEALTH DEPARTMENT

509 GIRARD STREET, BELLINGHAM, WA, 98266

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75 EMPLOYEES, SERVING A

POPULATION OF 201,140

## QI Team:

Alice Clayton, CD &amp; Epi PHN

Alice Simmons, Immunization Program Supervisor

Ben Scholtz, Public Health Advisory Board Member

Connie Kelley, Immunization Program PHN

German Gonzalez, MD &amp; CD &amp; EPI Division Manager

Sandy Abernathy, Immunization Program PHN

Susan Sloan, Performance Management Specialist

Terry Hinz, Assistant Director

**QI PROJECT:** *IMPROVING IMMUNIZATION PROGRAM  
VFC & AFIX SITE VISIT EFFICIENCY*

**PLAN**

Identify an opportunity and  
Plan for Improvement

**1. Getting Started**

The quality improvement project WCHD chose was intended to increase efficiencies in our Immunization Program while improving our readiness for accreditation by enhancing staff skills in implementing a QI effort.

**2. Assemble the Team**

Our diverse team drew heavily from the CD & Epi Division but also included administrative



staff and a member of our local Public Health Advisory Board. The team met every other week through May 2012 and was supported by a Centers for Excellence QI coach, Scott Davis.

**3. Examine the Current Approach**

Based on data from a 2011 evaluation of the Immunization Program, the team began with the goal of increasing two-year-old "up-to-date" immunization rates to 80 percent. Difficulties in implementing the project led the team to arrive at a more realistic project goal.

**AIM STATEMENT:**

Reduce the number of steps required to enter, retrieve and report Vaccine for Children Compliance (VFC) and AFIX Site Visit data by at least 30% by July 2, 2012.



The team conducted a detailed review of the VFC and AFIX process

flow and measured the number of steps in the process and the time required to complete VFC and AFIX visits. This review identified redundant and inefficient steps in the site visit process.

**4. Identify Potential Solutions**

The following potential changes were identified:

- ☐ Adopt the use of laptops during VFC and AFIX visits to create an electronic system for onsite reporting to providers and DOH.
- ☐ Complete provider "Summary Reports" in the field rather than back at the office.
- ☐ Eliminate the need for printing, copying and mailing reports to providers and DOH

**5. Develop an Improvement Theory**

*If WCHD reduces the time it takes staff to report VFC and AFIX visit findings, **then** additional staff time will be available to focus on provider education to increase two-year-old immunization rates and contribute to longer-term goals.*

**DO**

Test the Theory for Improvement

**6. Test the Theory**

Pre and post VFC & AFIX visit times were calculated for each Public Health Nurse.

**STUDY**

Use Data to Study Results  
of the Test

**7. Study the Results**

For VFC visits, the average visit time was reduced from 7.25 to 6.71 hours for a savings of .54 hours. Also, a gain of .67 hours of staff time was achieved because printing, copying and mailing of VFC reports were eliminated.

**COST SAVINGS PER VISIT= \$79.16**

**TIME SAVINGS PER VISIT = 1.21  
HOURS**

**ACT**

Standardize the Improvement and  
Establish Future Plans

**8. Standardize the Improvement or Develop New Theory**

Using field computers during provider VFC visits provides modest cost and time savings in reporting findings to providers and DOH. The team will be sharing these results with other WA Immunization Programs.

**9. Establish Future Plans**

- ✓ Complete post-times for AFIX visits and calculate savings.
- ✓ Create a standing QI agenda item for weekly Immunization Program meetings.
- ✓ Establish a program QI budget.
- ✓ Implement additional solutions identified during this project—eliminate the use of paper & pencil charts, for example.