

Tips to Improve Your Clinic's Immunization Rates

by Deborah L. Wexler, MD
Immunization Action Coalition
1573 Selby Avenue
St. Paul, MN 55104
651/647-9009

Here are 35 suggestions to help you improve your clinic's immunization rates. How many do you follow? (Although these "tips" were written primarily to increase immunization rates of children, many of them apply to adult patients as well.)

Y = yes, we do this
N = no, we don't do this
??? = we should think about doing this

Y N ???

- 1. Appointment schedulers remind parents to bring the child's shot record to every clinic visit, no matter what the reason for the visit.
- 2. The child's next immunization appointment is scheduled prior to the child's leaving the office, even if it's two to six months away. If appointment books aren't open that far in advance, an alternative method is used (tickler system, computerized tracking, etc.).
- 3. If a child misses her/his well child check (WCC), the child is rescheduled for a week or two later. If a WCC slot is not available, the child is scheduled in one to two weeks for a "shots only" visit.
- 4. The appointment scheduler is trained in true and false contraindications for vaccination. The scheduler knows that patients who have colds or are on antibiotics do not need to delay their return to the clinic.

Y N ???

- 5. The front desk staff pulls the charts of children in the waiting room who are siblings or children of the identified patient so the nurse can assess the immunization status of these children while they are in the clinic.
- 6. Whenever a child (or adult) comes in, the staff routinely asks to see his/her immunization record, reviews it, and determines in any vaccinations are necessary.
- 7. A notation such as " immunization status reviewed" is pre-printed on patient encounter forms and the immunization status is routinely reviewed at every patient encounter.
- 8. Nurses are empowered with standing orders to vaccinate.
- 9. While waiting in the exam room, the parent or guardian fills out a brief screening questionnaire for contraindications and precautions to determine if all vaccinations can be given safely that day.*
- 10. Immunization assessment and administration paperwork is completed by medical assistant or nurse before the clinician enters the exam room.
- 11. During the nurse assessment in the exam room, if we discover that shots were given at another clinic, we call that clinic right away to obtain the information to update clinic records and the patient's personal record card (if the information isn't on the patient's personal card).
- 12. If no shot records are available at the time of the visit and we are unable to access them by phone, we administer the vaccines that we THINK are needed based on the history we obtain from the parent. The parent signs a release of records to obtain immunization records from previous clinics whenever possible. If no records of previous shots can be located, the patient is treated as if unimmunized.
- 13. We give parents a printed vaccination schedule so that they know the ages at which their children need vaccinations.*

Y N ???

- 14. On the day of the visit, we ALWAYS give the parents (or the adult patient) a shot record card for that day's vaccinations, even if the shot record is at home.
- 15. We attach a "post-it note" to the patient's vaccination record card on which we've written, "return on (date) for Hib-4, Hep B-3," etc. We point this return date out to the parent.
- 16. We use our state's free immunization record cards. (They can be ordered for your local or state health department.)
- 17. We write a prescription for acetaminophen for patients whose insurance covers it (e.g., medical assistance) whenever a DTaP/DTP or MMR is given. (A rubber stamp speeds up prescription writing for acetaminophen.)
- 18. We have samples of acetaminophen available in the clinic. (For samples, call acetaminophen companies.)
- 19. When a child receives a DTaP or DTP, the nurse demonstrates the correct dose and the proper technique for administration of acetaminophen because parents may give a drop instead of a dropperful or administer it by spraying it into the throat.
- 20. We give the child an age-appropriate "gift" after vaccination - a rattle, stickers, a little book, or a coloring book and crayons - to make the parent and the child feel better.
- 21. We tell parents *again and again* to bring in their shot records *every* time they come in. (Some children change clinics frequently so the only complete shot record may be the one the parent has.)
- 22. We don't accept the parent's words, "my child's vaccinations are up-to-date," as necessarily current. We always review the child's immunization status.
- 23. We follow only true contraindications and precautions.
- 24. We never assume that adults are fully immunized against tetanus/diphtheria and always ask them for their Td vaccinations history.

Y N ???

- 25. We offer pneumococcal vaccine to all adults 65 years of age and older who do not have a record of receiving it or who cannot clearly recall having received it.
- 26. We discuss the hepatitis B vaccine with adults because many may need protection from this sexually transmitted disease.
- 27. We are a VFC provider and receive free vaccines for uninsured children through age 18.
- 28. We know the referral phone number for our city or county health department's immunization program.
- 29. We remind parents by phone or mail to come in for shots. (Patients can fill out reminded postcards during their visit.)
- 30. We track our patients by computer or by a simple tickler system.
- 31. Our patients' immunization records are kept at the front of their charts. (We don't just write this information on the visit page.)*
- 32. We review immunizations every time the child or adult comes in.
- 33. We offer "walk-in" immunization services run by a nurse whenever our clinic is open.
- 34. We offer Saturday or evening immunization clinic hours at our clinic.
- 35. We conduct periodic audits of our clinic's immunization rates. (Contact your state or local health department's immunization staff for assistance in performing an audit.)

* The Immunization Action Coalition has printed material available that will help you accomplish this tip. To obtain a copy of our catalog fax your request to 651/647-9131.