

INSTRUCTIONS FOR IMMUNIZATION CTP & PROGRESS REPORT

Agencies writing new CTPs are required to have objectives in two areas:

Part A: Continuous Quality Improvement objectives based upon yearly Local Health Department (LHD) AFIX assessments. The overall goal is to reduce vaccine preventable disease *in children seen in LHD clinics* by focusing on improvements to one or more assessment measures. Possible objectives for Plan A include:

- Increasing 4:3:1:3:3:1 series Up-To-Date (UTD) rates for 2 year olds
- Increasing single antigen rates (ex., 4th DTaP, Hepatitis B, Varicella)
- Decreasing Late Starters
- Increasing Late Starter's UTD rates
- Decreasing Missed Shot/Opportunities rates

Part B: Outreach and Education objectives that reflect an LHD's work with community partners and citizens. You must select from the following options:

- **Promote the ALERT Registry** (to medical clinics, schools, colleges, child care providers). Possible promotions can include
 - Use of ALERT for school law/school exclusion purposes as a means of reducing the number of annual exclusion letters
 - Advising existing and new ALERT users about the expansion to a lifespan registry
 - Work with State ALERT staff on increasing participation by local providers
- **Improve vaccine accountability practice in existing clinics** (i.e., working with private clinics, delegate agencies, jails, Job Corps, school-based health centers and other local Vaccines For Children providers to: improve and ensure storage & handling practices; update equipment; train staff; improve billing & coding to avoid Medicaid fraud, etc.)
- **Conduct an ongoing community-wide AFIX project.** This can include:
 - Planning & hosting a yearly AFIX eXchange in cooperation with OIP
 - Actively promoting AFIX with private providers and committing to recruiting a percentage of area clinics each year who agree to an assessment and staff feedback
- **Develop, participate and maintain a county- or area-wide immunization coalition.** This coalition may focus on children, adolescents, and/or adults. It may focus on particular areas of community concern relating to immunization issues & practices. There must be at least quarterly meetings. [For information on starting and maintaining coalitions, you may contact your Oregon Immunization Program Health Educator for assistance.]

- **Increase community provider use of recognized immunization standards for pediatric, adolescent and/or adult immunizations.** This can include a community project (for public & private clinics, School Based Health Centers, delegate agencies, etc.), that focuses on the 17 child & adolescent or 15 adult immunization standards that help to achieve and maintain high vaccination rates. Projects may target one or more standards yearly over the three years. To review these standards: <http://www.cdc.gov/vaccines/recs/vac-admin/rev-immz-stds.htm>
Activities can include:
 - individual provider trainings and materials
 - a series of workshops open to providers and community
 - strategies based on the standards and designed to increase immunization rates and protect against vaccine preventable disease.

- **Improve immunization rates in target populations.** This objective must include identification of vaccine coverage rates and current efforts to target immunizations in specific population(s). It can include reminder/recall efforts to specific population groups. Possible areas of focus can include:
 - Working with area hospitals to improve hepatitis B birth dose administration, and complete reporting in the electronic birth record
 - Promoting standing orders for vaccines in private practices, area birthing hospitals, and FQHCs, RHCs & M/CHCs
 - Promoting vaccines to specific population groups (i.e., ethnic/ cultural, faith-based, drug/alcohol treatment patients, migrant workers, the elderly, nursing home/care center patients & health care workers, etc.)
 - Promoting adult and/or health care worker flu vaccine
 - Promoting adolescent & adult Tdap vaccine

3. Other important information:

- **Annual Progress Reports** must reflect the activities and outcomes of your past year's work. *The report will cover the following period: July 1, 2008 through April 30, 2009.* Outcome measures should be specific and include data to support the work you have done. The Progress Report column is where you may add narrative describing your activities, progress towards meeting your objective(s) or information on why objectives were not met. It is also the place to report on changes/modifications to activities or outcomes that will be modified for the next year of your plan

- **New CTP Parts A & B may include multiple objectives in more than one area.**

- **Objectives should be SMART**, i.e., **S**pecific (concrete, detailed, well defined), **M**easurable (numbers, quantity, comparison), **A**chievable (feasible, actionable), **R**ealistic (considering resources) and **T**ime-Bound (a defined time line). See the link to writing SMART objectives and activities on the OIP website.

- **There are sample templates of completed objectives, activities and measurable outcomes for Parts A&B of the CTP.** You are welcome to use these templates and choose from their lists of possible activities—cutting and pasting into your own CTP is fine. You are not required to use the samples, and not required to choose all possible activities. Create plans that fit your agency and community needs.
- **You are not restricted to the objectives, activities or measurable outcomes used in the samples;** however, it is recommended if you choose other objectives that you contact your OIP Health Educator for technical assistance.
- **You may use the same objective(s) for years 2 and 3 of your plan. Year 2 and 3 must repeat ongoing activities and be updated yearly to reflect modifications you make.** You may modify your plan to fit your needs (e.g., dropping activities that are met, cannot be completed due to changing circumstances or have not been successful; adding new activities and outcome measures, etc.)

4. Resources:

- ALERT site database: <http://www.immalert.org/new/>
- Population Based Rates chart:
<http://www.oregon.gov/DHS/ph/imm/Research/index.shtml#county>
- Vaccine Preventable Disease rates by county:
<http://www.oregon.gov/DHS/ph/acd/stats.shtml>