Using EHRs for Quality Improvement: Vaccinations

Vaccinations

Dr. Goldman has attested to Meaningful Use and her first incentive check is in the mail. She has harmonized her elective quality measures around immunizations because she knows her EHR product is certified for immunization measures. Dr. Goldman also consistently gets the same denominator with accurate reports. Dr. Goldman discovers that for her pediatric patients, her immunization rate is much lower than she’d like. Dr. Goldman’s REC representative works with IT staff and her vendor to review her system’s functionality, repeat the reports, and confirm they are accurate. Knowing these patients are at risk of serious illness without appropriate vaccines, Dr. Goldman wants to learn about systematic ways to improve. First the REC advises Dr. Goldman to use the appropriate personnel and method for her EHR product to utilize the patient list function to identify the names and phone numbers of all patients in her practice without all recommended vaccinations. The REC then presents Dr. Goldman with these potential options:

Engage at Risk Patients

* Find out the patient’s preferred method of receiving reminders, and remind them to come into the office
* During a visit systematically review patient record for documentation of needed vaccinations
* Discuss any barriers to receiving vaccines – e.g. fear of the medicine, price issues, side effects
* Elicit, confirm, and record any vaccinations that were received at other venues
* Review and update the medication allergy list
* Consider nursing led vaccination clinics to perform the above functions and administer “catch up” vaccines

Use EHRs to Engage Patients

* Activate clinical decision support to:
  + Highlight due and overdue vaccinations services at every visit
  + Survey problem lists for contra-indications / exclusions
* Use drug-drug and drug-allergy interaction checks
  + Review to determine if vaccination is contraindicated
* Review state immunization registries when available;
* Use patient education function
  + Use print-outs, websites, and/or kiosks specified for a low-health literacy audience
  + Have staff use it to assess patient knowledge and use teach back at subsequent visits

Implement a Workflow that Supports Quality Improvement

* Start the change cycle and workflow with one provider
  + Perfect the mechanics and team roles
  + Repeat process measures to see if process is consistent
  + Repeat measurement and assess if improvement has occurred
  + Employ a “team huddle” before each of these clinic sessions
    - Review the patients who have had difficulty keeping their vaccinations up to date from the entire staff’s perspective
    - Use hypothetical cases to ensure that the team understands the protocols well
    - Ensure that appropriate patient information is gathered and / or obtained as appropriate
    - Divide important educational tasks
* Spread to other providers and set up staff meetings to give provider-specific feedback
  + If the feedback is public in a peer group, the incentive to adhere to the workflow and achieve improvement is intensified