

Michigan IQIP Program Guidance for Technical Assistance for Consultants: Project Year 5, 2023-2024

Overview

Immunization provider site closures, cancellations of well-child visits, and decreases in VFC vaccine ordering indicate that children and adolescents may be falling behind schedule on vaccinations, increasing susceptibility to vaccine preventable disease. Michigan IQIP site visits can play a role in assisting VFC providers in bringing their children and adolescents up to date as quickly as possible.

Consultants are encouraged to incorporate the ACIP Recommended Schedules and vaccination recall into their IQIP technical assistance, training at IQIP visits. IQIP consultants may include the topic of 'recall' during check-in calls and during in-person IQIP visits.

About Technical Assistance

Technical assistance is a critical element in successful strategy implementation and should be provided throughout the IQIP cycle. Consultants should be prepared to offer a variety of technical assistance options for each IQIP core strategy (see table below) and align the technical assistance to the specific needs of the provider location. Technical assistance options include but are not limited to:

- Role-playing how staff discuss scheduling the next appointment with parents/patients
- Providing demonstrations of IIS functions and reports and involving jurisdictional IIS technical assistance if needed
- Role-playing prescriber-parent interactions for giving a strong recommendation
- Reviewing current, applicable handouts and materials explaining their use, and what makes the source relevant and trustworthy

Recommended Technical Assistance and Action Steps for IQIP Visits & Activities

Step 1: Consultants conducting IQIP visits can query the CDC IQIP Database to assess status of IQIP visits. The table below lists a few of the IQIP Database functions that may assist consultants with becoming comfortable with data entry (training videos) and with the identification of VFC provider sites that are due/overdue for IQIP check-in calls or IQIP follow-up visits. It is recommended for consultants to be familiar with the IQIP Operations Guide PY5 and the Michigan IQIP Database User Guide PY5.

Table: IQIP Database Functions				
Resource	Description			
Tutorial videos for IQIP	Series of 16 tutorial videos covering all aspects of the IQIP Database,			
Database	from log-in to the completion of a 12-month IQIP cycle			
Status Tracker- IQIP Report	Report of provider location record completion status (IQIP records			
	only)			

Overdue Incomplete- IQIP	Report of all initiated IQIP records (not Alt QI records) with a planned	
(Any State) Report	date for the 2-month check-in, 6-month check-in, and/or 12-month	
	follow-up that has passed without being completed. Any provider on	
	this list is overdue for a check-in or follow-up.	
TA Provided Report	Report includes all data entered that describes technical assistance	
	(TA) provided at each step of the IQIP process. The report also	
	indicates which strategies were selected for	
	implementation/improvement on the site visit and which were not.	
	Only providers with a site visit marked as "complete" will appear.	

Step 2: Consultants should review and become comfortable discussing the various QI reports and other areas and components of MCIR, to include: site information, patient information and generating recall letters. The following technical assistance areas are recommended for discussion with provider staff during IQIP visit and activities. These topics should be entered as the technical assistance and action items in the IQIP database:

- CDC Standard QI Report: Identifies coverage levels for 3 age cohorts (2, 13 and 17-year olds)
- Eligible NOT Overdue QI Report: Identifies people that can be vaccinated using accelerated and routine schedule
- Overdue QI Report: Identifies people that should be vaccinated using the catch-up schedule
- No Vaccinations Received in the Last 12 Months Report: Identifies people that can be vaccinated and have not been vaccinated in Michigan in the last year.
- MCIR recall at various age cohorts that can increase coverage levels, such as 12-24 months, 11-13 years and 15-16 years
- Verifying in MCIR the staff email addresses and other contact information for the site
- Review process to verify patient addresses in MCIR and checking the patient status (active vs inactive)

Step 3: Consultants should be knowledgeable of the various resources and training that is available to prepare themselves for conducting IQIP visits. The topics and content listed below can be used by the consultants to assist providers with their identified Core Strategies. Most documents can be found at www.Michigan.gov/sitevisitguidance. The following topics are recommended and if used during a IQIP activity should be entered into the IQIP database:

- ACIP Recommended Vaccination Schedule
- MCIR functionality: use of QI reports for patient lists and how to update patient status, active vs inactive
- MCIR ability to generate recall letters use specific age cohorts that are manageable for the practice
- MCIR cleanup for accurate recall letters: patient address, contact information, patient status active/inactive
- IQIP immunization workflow assessment job aid: see "CDC Immunization Workflow Assessment" which blends the IQIP strategies, immunization workflow points, key messages, and discussion prompts

- IQIP Preparation Checklists
- MI IQIP Site Visit Confirmation Letter
- IQIP At-A-Glance for Consultants
- IQIP At-A-Glance for Providers
- The Role of an Immunization Champion

Step 4: Identify examples of core IQIP strategy-specific technical assistance and action items for a provider's chosen IQIP strategies for the current project year. See table below:

Table: IQIP strategies and examples of strategy-specific technical assistance and action items (Refer to the Overview of IQIP Core Strategies resource found in the IQIP Library)				
Core IQIP Strategies	Examples of Technical Assistance	Example Action Items (not an exhaustive list)		
Facilitate return for vaccination Leverage IIS functionality to improve immunization practice	 Role play how staff discuss upcoming appointment scheduling with parents. Demonstrate how to set upreminder and/or recall for patients in MCIR. Brainstorm various options for getting patients back into the office for on-time vaccination. Review MCIR benefits for the provider. Provide hands-on demonstration and training in MCIR functionality. Demonstrate management of patient status (PAIS, MOGE, etc.). 	 Initiate the reminder function in the practice's EMR which sends e-mail and/or text message reminders to parents/patients. [Erica L., 6/1/2024] Front desk staff will begin making routine phone call reminders for all upcoming appointments. [Jessica S., 3/31/2024] On the first Monday of every month, access MCIR, run a patient line list, and review missed opportunities with staff [Miguel, start 11/4/2023]. 		
Give a strong vaccine recommendation	 Review recent reasons for patient refusals and provide resources/training for addressing vaccine mis/disinformation. Role play patient-provider scenarios using the presumptive announcement method. Develop a script for presumptive announcement and practice its delivery. 	Encourage all staff members who discuss vaccination with families to download the "HPV Vaccine: Same Way, Same Day" mobile app; verify that all have completed the 30 minutes of interactive exercises before the 2-month check-in [Susan and Miguel: 2/1/2024].		

Strengthen vaccination communications	 Share sample vaccination policy and discuss how to develop one for the site. Share links to web resources for social media posts and web-ready gifs and memes. Provide posters and other promotional materials that can be displayed in the waiting area. 	into all new patient packets [Rebecca: 8/30/2023].
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