

Tips for Conducting Tele-IQIP



Overview

The CDC IQIP Program offers awardees the option to conduct IQIP site visits in person or virtually as a “Tele-IQIP” site visit. The IQIP program requirements regarding the site visit must be met when conducting Tele-IQIP as when performing an in-person site visit. In addition, there are some differences with Tele-IQIP made necessary due to the use of the virtual format. This resource provides tips and best practices from awardees conducting Tele-IQIP site visits.

Tips for Preparing for the Tele-IQIP Visit

- ✓ Identify the right virtual platform.
 - Some provider locations may request a particular platform or have difficulties with specific platforms. Confirm that an appropriate virtual platform is selected in your communication with the provider staff to set up the tele-IQIP visit.
 - Make sure your consultants are trained and comfortable with the platform, especially new hires.
- ✓ Have all materials ready to be displayed (e.g., websites open and resources ready to be shared on screen).

Tips for Participant Engagement During the Tele-IQIP Visit

- ✓ Start the visit by making sure that everyone can hear each other and see what you are sharing clearly.
- ✓ Check that they received any resources or materials you sent in advance and ask if they have them handy.
- ✓ Make sure everyone introduces themselves and their role.
 - Make a note of each person’s name and their specific role so you can ask targeted questions during the visit.
- ✓ Have your camera on as much as possible and encourage the provider staff to turn on their camera as well.
- ✓ Have a standard slide deck for the visit that visually engages provider staff and helps the IQIP consultants comprehensively conduct each element of the IQIP site visit.
 - Slide decks should include an agenda, clear sections for each part of the site visit, and prompts for conversation.
 - Use the immunization workflow diagram or other visual cues to walk through each step of the vaccination workflow.
- ✓ Do a live demonstration of running coverage reports and other IIS functions instead of just reviewing a downloaded report.
- ✓ Do role plays with provider staff to hear how they recommend vaccines and how they discuss upcoming vaccination appointments with parents/patients.
- ✓ Pull up the provider’s website to discuss opportunities for promoting vaccination on their webpage and social media.
 - Have examples of messages, visuals, and other content that could be added to the webpage or social media accounts.
- ✓ Use facilitation techniques to ensure all participants are actively engaged during the site visit discussion.
 - Have regular verbal check-ins with everyone on the call to gauge understanding and engagement.

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Michigan Required Criteria for Tele-IQIP Visits

- LHD IQIP consultants must use a live virtual platform and computer with functionality for screen sharing (to ensure effective presentation of documents and demonstration of software) and video conferencing (to increase engagement and allow for visual cues).
 - Whichever virtual platform is used, ensure that it can be used continuously for the duration of the session and that it does not have an insufficient maximum call length.
 - The virtual platform must be HIPAA-compliant to protect patient privacy if personally identifiable information arises during the discussion. The following site includes examples of acceptable software: <https://telehealth.hhs.gov/providers/telehealth-policy/hipaa-for-telehealth-technology>.
 - Consultants must be proficient in using the awardee’s video conferencing platform and its screen-sharing function before hosting a Tele-IQIP visit. If not, they should be trained until they do, or they should conduct in-person IQIP site visits only.
- IQIP visits must also remain compliant with HIPAA rules. It is recommended that patient lists and other identifiable information included with some QI reports not be shown on the Tele-IQIP visit video platform. For more information on HIPAA and IQIP visits please visit: <https://www.cdc.gov/vaccines/imz-managers/laws/hipaa/qa-patient-recs-IQIP-vfc.html>
- Consultants must instruct provider staff on using the video conferencing platform at the beginning of the call if the provider staff are unfamiliar.
- The Tele-IQIP visit must include a live audio with video of staff from provider site for the overview and walk through of the provider site’s workflow for patients receiving immunization services.
- The Tele-IQIP visit must adhere to Michigan IQIP requirements and comply with current MDHHS guidance for IQIP site visits, which includes participation by prescribers (MDs, DOs, PAs, NPs) and other decision-making staff from the office.
- Site visits with multisite provider groups must have a representative from each participating provider site in attendance for the duration of the virtual visit.
- The IQIP visit and the 12-month IQIP Follow-Up can be conducted using the Tele-IQIP method and can be on the same date/same time, but can not include a completely virtual VFC visit.