Immunization Service Provider Call

January 2025

Please place your name, and provider in the chat.

OKLAHOMA
State Department of Health



Agenda

- Immunization Exemptions in Oklahoma Martin
- Immunization Quality Improvement For Providers Dara
- Vaccine Returns Teja
- Provider Update Form Lisa
- Guest Speaker
 Dr. Lyndsay Sheperd, PharmD, BCCCP
 Pharmacist and Medical Science Liaison
 Sanofi Vaccines
- Looking Forward

Exemptions in Oklahoma

Martin Lansdale, MPH



State Exemption Request Process

OSDH Exemption Database

Kindergarten Survey

Exemption Rate Comparison

Conclusion

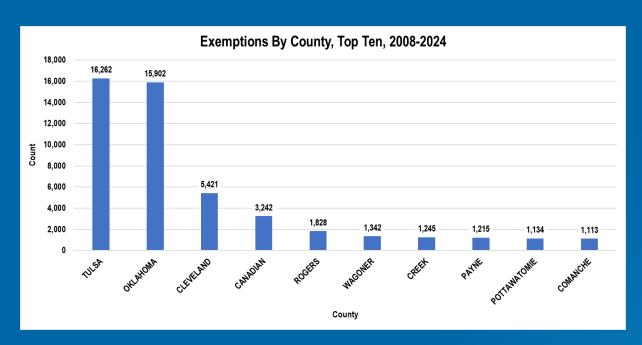
Exemption Request Process

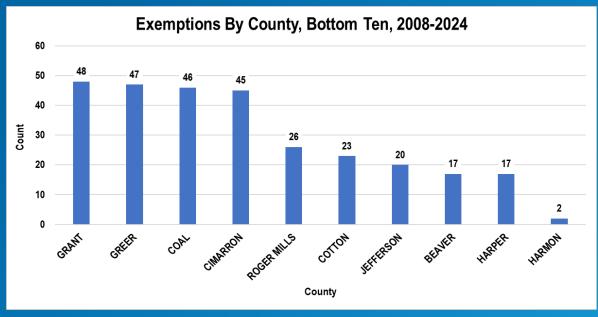
- Oklahoma law requires parents/guardians of all children attending school, child care facilities, and Head Start programs in this state to submit immunization documentation.
- However Oklahoma law does allow exemptions for medical, religious, or personal reasons.
- Process includes a paper form exemption request filled out by parent/school and mailed to OSDH Immunization Services.
- Requests are reviewed by OSDH Immunization staff and approved/denied.
- Approvals/denials mailed back to parent/school.

OSDH Exemption Database

- 72,421 exemption requests submitted between 2008 and 7/31/2024.
- 70,635 exemptions approved.
- At least 1/3 of DOBs were missing result: unable to accurately determine exemptions by age.
- 2020 Census Population Data was used as the denominator for OSDH exemption database rate calculation.

OSDH Exemption Database

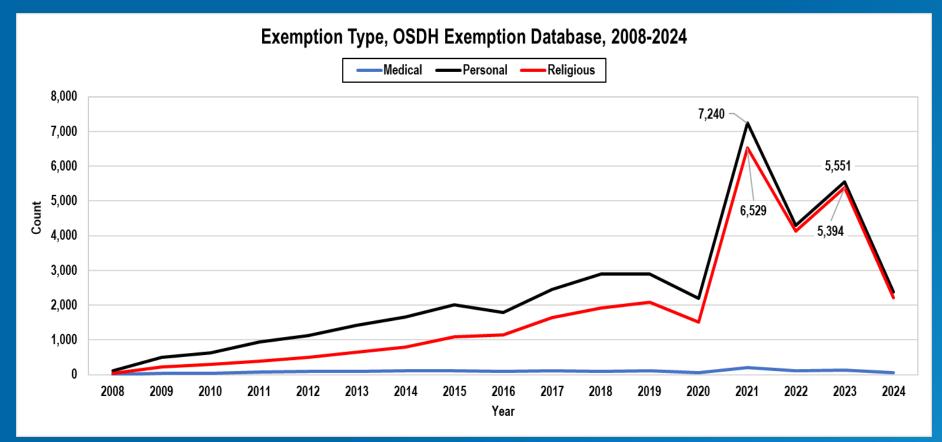




Oklahoma and Tulsa Counties had the highest populations and highest number of approved exemptions.

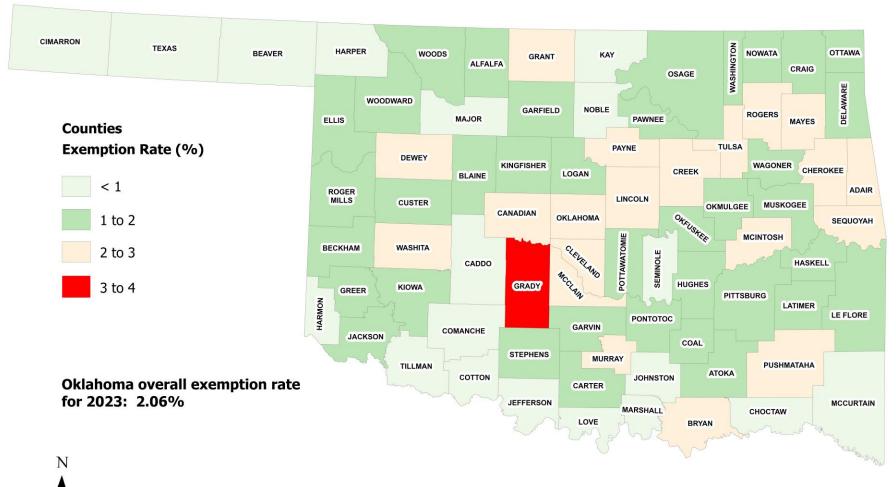
Harmon has a lower population, therefore had fewer approved exemptions.

OSDH Exemptions (cont.)



Personal
Exemptions
were the most
common
followed by
Religious and
Medical
Exemptions.

2023 Oklahoma Exemption Rates by County, OSDH Exemption Database





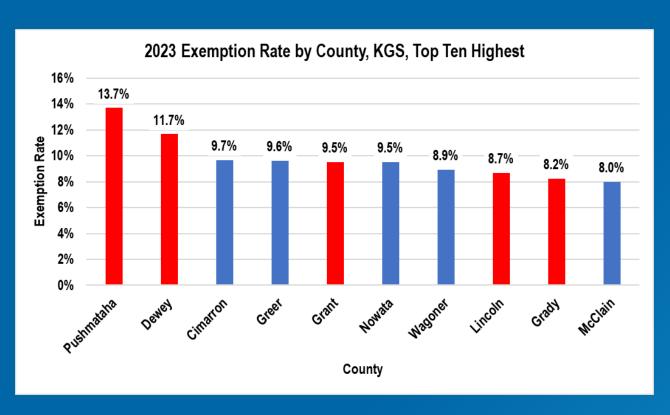
0 15 30 60 90 120 Miles

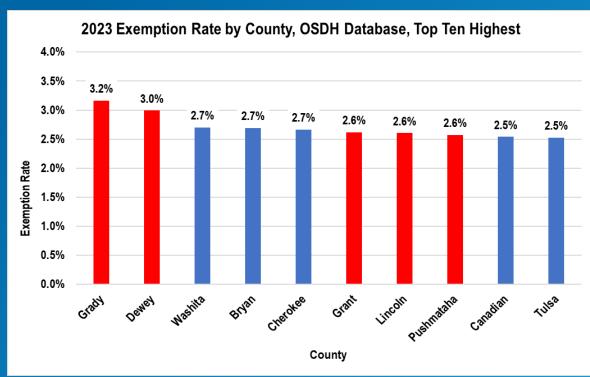
Data Source: OSDH Exemption Database database and 2020 US Census. Coverage rates calculated using a combination of Exemption and 2020 US Census data for the 2023 calendar year.

Kindergarten Survey (KGS)

- Each year, the OSDH conducts a survey with schools throughout the state to assess vaccination coverage and exemption status of children enrolled in public and private kindergarten programs.
- Survey conducted between December and April and includes questions about the 6 school-required vaccines.
- School reports vaccination information based on their student vaccination records (submitted to them by parent/guardian).
- Aggregate results are analyzed and then shared with the Centers for Disease Control and Prevention (CDC) for inclusion in the National Kindergarten Survey Report.

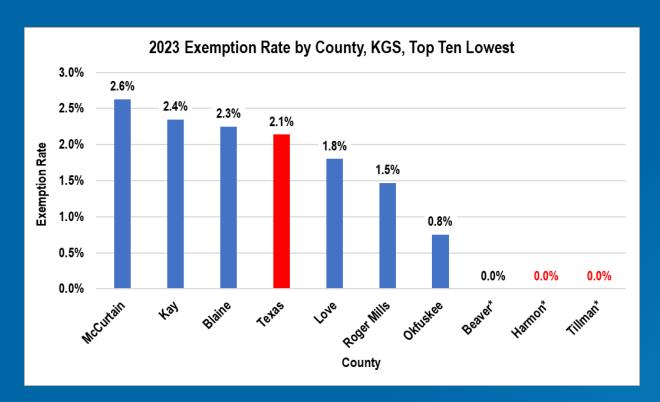
Exemption Rates, KGS vs OSDH

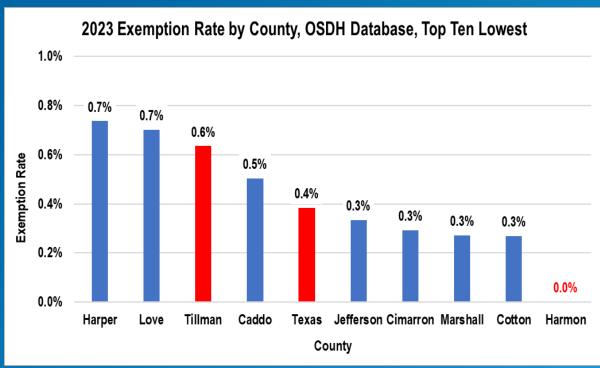




Grady, Dewey, Grant, Lincoln, and Pushmataha Counties had some of the highest rates in both the KGS and OSDH Exemption database (highlighted in red).

Exemption Rates, KGS vs OSDH



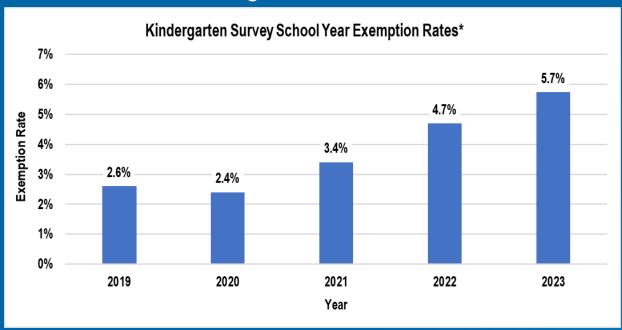


Harmon, Texas, and Tillman Counties had some of the lowest rates in both the KGS and OSDH Exemption database (highlighted in red).

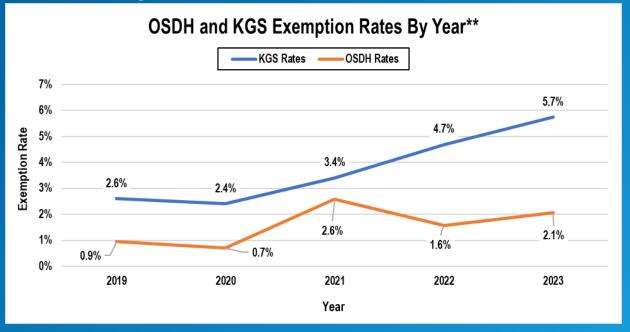
*Schools surveyed reported no exemptions in that county.

Exemption Rates, KGS vs OSDH

KGS Exemption Rates have increased steadily since the 2021-2022 school year



Both the KGS and OSDH Exemption Database showed increased exemption rates since 2020.



*Up-to-date defined as 4/5 doses of DTaP, 3/4 doses of Polio, 2+ doses of MMR, 3+doses of Hep B, 2+ doses of Hep A, and 1+ doses of Varicella administered according to recommended age and intervals.

** OSDH exemption rate age range is 3-18 (includes Head Starts, Day Care Centers, all school types) while KGS exemption rates include school-aged children going into Kindergarten (public/private/charter schools).

Conclusions

Counties with higher populations tend to have higher exemption requests/rates compared to lowly populated counties.

Personal exemptions were requested the most followed by religious exemptions.

Exemption rates have increased over the last 5 years for both the state and school-aged children.

Counties with increased school exemption rates showed higher overall exemption rates.

Kindergarten Survey Data link (Shot Records).

Immunization Quality Improvement For Providers (IQIP)

Dara Rue, IQIP Coordinator



Immunization Quality Improvement for Providers (IQIP)

What is IQIP?

- IQIP is CDC's national, Vaccines for Children (VFC) provider-level immunization quality improvement (QI) program. IQIP serves to assist and support health care providers by identifying opportunities to improve vaccine uptake and to help providers be:
- Motivated to try new vaccination service delivery strategies and incorporate changes into their current practices
- Supported in sustaining changes and improvement to their vaccination service delivery
- Aware of and knowledgeable about vaccination coverage and missed opportunities to vaccinate
- Able to use available data from the IIS to improve services and coverage



The IQIP process

IQIP is a 12-month process during which public health representatives and VFC providers collaborate to implement provider-level QI strategies to increase vaccine uptake by improving and enhancing vaccination workflow.

Site Visit	2-Month and 6-Month Check-Ins	12-Month Follow-Up
 Provider's vaccination workflow is observed, and initial coverage is reviewed QI strategies are selected Technical assistance is provided by the IQIP consultant Action items are chosen for strategy implementation plan 	 Progress toward strategy implementation is reviewed Technical assistance is provided by the IQIP consultant Strategy implementation plan is reviewed and updated 	 Progress toward strategy implementation is reviewed and updated Technical assistance is provided by the IQIP consultant Year-over-year coverage change is reviewed



1-Facilitate Return for Vaccination

Facilitating the patients return for vaccination promotes adherence to the schedule by:

- Explicitly specifying when future doses are due and why
- Establishing continuity of care
- Creating a commitment to return
- Example activities:
 - Maintain accurate patient contact information
 - Use effective scheduling protocol
 - Implement reminder/recall systems
 - Track no show and cancelled appointments
 - Use OSIIS reports to identify patients needing immunizations



2-Leverage Immunization Information System (IIS) Functionality

On-time vaccination depends on knowing what vaccines a patient is due for and when they are due. High-quality data in the IIS can support providers by:

- Providing consolidated vaccination records for each patient
- Generating lists of patients due for vaccines
- Forecasting future dose due dates to assist with scheduling
- Delivering reminders for upcoming appointments
- Providing practice-based coverage assessments
- Example activities:
 - •Identify workflow points where procedures will be revised for looking up patient vaccination histories, vaccine forecasts, or generating patient lists.
 - •Enter new patients' historical vaccination data into the IIS to more accurately determine which doses are due.
 - •Promptly enter all vaccine doses administered into the IIS, set up routine electronic reporting to the IIS, or work with the jurisdiction's IIS team to improve existing EHR-IIS integration.
 - •Set up or fine-tune the IIS's reminder and recall settings for vaccination appointments. (Reminder/recall reports)
 - •Update patients' active/inactive status in the IIS on a routine basis.
 - •Designate staff person to routinely run IIS-based coverage assessments to monitor provider immunization performance.
 - •Use information in IIS coverage reports during staff meetings and team huddles to identify opportunities for improving vaccination performance.
 - •Verify/update patient contact information for reminders, recall, and follow-up.
 - •Provide the parent with their child's updated vaccination record and/or share information about the IIS's public access portal.



3-Give a Strong Vaccine Recommendation

On-time vaccination is dependent upon parents choosing to vaccinate their children and adolescents. As parents' most trusted source of vaccine information, health care professionals are well positioned to increase vaccine acceptance

- Use presumptive language when giving a strong vaccine recommendation
- Prepare and practice responses to common parent questions and/or concerns about vaccination
- Arrange for provider education and any necessary training on the new approach
- Example activity use strong vaccine recommendation script
 - "Your child needs three shots today."
 - "Your child needs DTaP, Hib, and Hepatitis B shots today. Do you have any questions?"
 - "Now that your son is 11, he is due for three vaccines that will protect him against meningitis, HPV cancers, and whooping cough. Do you have any questions?"

https://www.cdc.gov/vaccines/hcp/conversations/talking-with-parents.html https://www.cdc.gov/hpv/hcp/answering-questions.html



4-Strengthen Vaccination Communications

Myths and misinformation about vaccines put on-time vaccination at risk. Trust in vaccines is not built through a top-down approach, but through conversations between parents, doctors, nurses, pharmacists, and community members. Patients and parents can feel more confident about vaccinating when everyone in the practice share the same message

From the front desk to the exam room to checkout, everyone plays an important role in supporting vaccination. Strengthening vaccine communications engages provider staff as vaccine partners by helping them:

- Increase positive vaccination messaging throughout their practice
- Provide accurate, easily accessible information on vaccines
- Engage in effective vaccine conversations with parents
- Example activities:
 - •Develop and implement a practice-wide vaccination policy.
 - •Include vaccine-related material (e.g., practice vaccination policy, ACIP immunization schedule, educational items, etc.) in new patient information packets.
 - •Direct questions to the appropriate staff should the parent have questions or concerns.
 - •Direct hesitant parents to sources of accurate, reliable vaccination information.
 - •Incorporate and routinely refresh vaccine-related content on the practice's website.
 - •Plan and implement vaccine-positive posts on the practice's social media accounts.
 - •Identify how everyone can play a part in supporting vaccination throughout the practice and review these steps during staff meetings and/or adding to staff training curriculum.
 - •Incorporate and routinely refresh vaccine-related content in the staff training curriculum (e.g., the ACIP immunization schedule, common questions and concerns about vaccines and how to address them, etc.)
 - •Create and monitor a feedback mechanism for staff members to ask questions or receive guidance on vaccines.



Benefits of Immunization QI Projects

Quality improvement (QI) programs, such as IQIP, analyze processes and use a systematic approach to improve performance.

Like other QI programs, the IQIP program is based on these basic steps:

- State the problem and desired result
- Use data to understand the problem
- Identify strategies for improvement
- Implement strategies and refine as needed
- Evaluate outcome
 - Benefits to QI
 - •Addressing the burden of vaccine-preventable diseases
 - Catching up on well-child visits and recommended vaccinations
 - Reducing missed opportunities
 - •Increasing vaccine confidence
 - •Using coverage assessments to address performance improvement



1/24/25

Immunization Quality Improvement for Providers

For more information on how to participate in IQIP, please contact:

**Dara Rue, 918-864-9018 darar@health.ok.gov

**Or call Immunization Service at 405.426.8580 for assistance



OKLAHOMA
State Department of Health

Vaccine Returns

Sai Teja Paruchuri



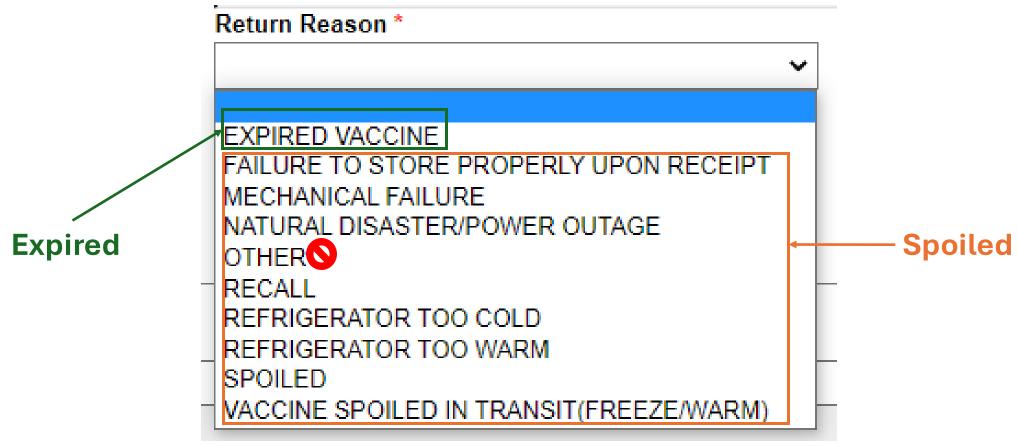


Vaccine returns

Once vaccines in your inventory are spoiled/expired, please submit a return in OSIIS to send the vaccines back to McKesson. Vaccines that are full/unopened boxes and opened boxes, unopened vials, pre-filled syringes can be returned. This includes:

- Routine VFC/317/state vaccines
- Flu vaccine
- COVID-19 vaccine shipped from Mckesson
- Direct-ship vaccine from Merck
- Direct-ship COVID-19 vaccine from Pfizer
- The best practice is to create a return in OSIIS as soon as the vaccines are expired. Once the returns are processed, you will receive a return label either through email or mail based on the label shipping method you choose.
- As soon as you receive a return label, sort the vaccines by NDC, ensure that the vials don't break during shipping: use a bubble wrap/ packing paper; ship the vaccines within 30 days after receiving shipping labels.
- Never discard expired vaccine that can be returned to Mckesson.
- Please wait until the vaccine is expired to submit a return in OSIIS.

Vaccines that can be returned



Vaccines that cannot be returned:

- Unexpired vaccines
- Privately purchased vaccines
- Partially used vials
- Vaccines that were ordered in error. Please pay attention to the vaccine brand while placing a vaccine order. This helps to prevent ordering the vaccines that are not used in your facility.
- Viable vaccines

How to pack vaccine returns for shipping

- Sort vaccines by NDC and ensure that vials don't break during shipping: use bubble wrap/ packing paper.
- Vaccines can be returned in original packaging.
- Do not put ice packs in the box.
- Pack only the vaccines that are mentioned in vaccine returns in OSIIS.
- Print out the return detail and include it in the box while shipping.
- Ship the vaccines as soon as you receive the return label. Return labels expire after 30 days.
- Create and submit a vaccine return as soon as the vaccines are expired.

Provider Update Form

Lisa Jamison, IFC





When to Use:

- Clinic/Site Name Change
- New VFC Primary/Backup Coordinators
- ❖ New Site Administrator
- New address
- New Phone number
- New Fax number
- New Delivery hours for vaccine
- New Refrigerator/Freezer
- Moving Refrigerator/Freezer
- New Prescribing Providers



VFC PROVIDER UPDATE FORM

Upon return of this form, a member of our Immunization staff will contact your facility to address, as needed, your specific needs.		
NAME OF CLINIC (as it appears in OSIIS):		
CHANGE CLINIC NAME TO:		
Date of Request:// VFC PINOSIIS ID		
Staff Changes:		
New Primary VFC Coordinator New Secondary VFC Coordinator		
NAME: NAME:		
E-MAIL EMAIL		
New Site Administrator		
A Facility Authorization Request form is needed to add Site Administrators in OSIIS		
OFFICE RELOCATION/CHANGES EFFECTIVE DATE://		
NEW ADDRESS:		
NEW PHONE NUMBER: () - NEW FAX NUMBER: () -		
CHANGES TO OFFICE SCHEDULE AND/OR DAYS AND TIMES WHEN VACCINE MAY BE DELIVERED:		
Mon Tues Wed Thur Fri Sat		
WEEKLY OFFICE HOURS		
Mon Tues Wed Thur Fri Sat		
OFFICE DELIVERY HOURS		
IF THE OFFICE IS CLOSED FOR LUNCH, PLEASE SPECIFY THE <u>EXACT</u> TIME THE OFFICE IS CLOSED.		
IF YES, WHEN?		
NEW REFRIGERATOR / FREEZER MOVING REFRIGERATOR / FREEZER		
New or relocated vaccine storage units must be monitored by taking 5 days of temperatures prior to usage. Documentation of temperatures is required.		
ADDITIONAL/NEW PROVIDER: PROVIDER'S NAME TITLE MEDICAL LICENSE # MEDICAL DESCRIPTION M		
1		
2.		
CHANGES TO YOUR CLIENT ENROLLMENT DATA, REQUIRE AN AMENDED PROVIDER PROFILE BE SUBMITTED		
Please contact your Immunization Field Consultant or the VFC program with any questions.		
Immunization Field Consultant (IFC): LISA JAMISON		
Phone: 405-549-2679 FAX: 405-900-7612		
Oklahoma State Dept of Health, VFC Program Immunization Division		

PHONE: 405-426-8580 FAX: 405-900-7612 EMAIL: VFCHelp@health.ok.gov

Pediatric RSV and FLU

Dr. Lyndsay Sheperd, PharmD, BCCCP Pharmacist and Medical Science Liaison Sanofi Vaccines



Questions/Suggestions

Looking Forward:
Discuss a topic that interests you
Next Call:
April 4th, 2025
at 12pm

