Today’s Objectives

- Provide an overview of the Moving Needles Project
- Share details about the quality improvement pilot
- Encourage Summit members to visit the website and sign up for the newsletter
The Big Picture

Goal
Make routine adult immunizations a standard of care for PALTC residents and an expectation for employees.

Main Components
- Align existing immunization policies and procedures in PALTC
- Develop pilot programs to test standardized routine adult immunizations across all PALTC settings, for both residents and staff
- Establish baseline data and measure improvement
- Integrate routine immunization and reporting to state IISs into workflows and EHR systems for both staff and residents
- Demonstrate both clinical benefits and operational/cost benefits to implementation
- Establish a permanent resource on PALTC immunization

Overview

$66m contract over 5 years

$55.5m CMSS

$10.5m AMDA

7 subspecialty societies

PALTC organizations

EHRs and IIS

Nursing Home Chains
Assisted Living Chains
PACE/HCBS Programs
Timeline

- Funding Awarded: September 2021
- Pilot Chains, Sites, and Team Identified: January-April 2022
- Quality Improvement Pilot Round 1: July 2022 – June 2023
- Interventions and Supports Reviewed: May 2023
- Quality Improvement Pilot Round 2: July 2023 – June 2024
- Change Package and Training Curriculum Produced: July 2024 – June 2025
- Economic and Workflow Analyses Completed: September 2025
- Quality Improvement Expansion to AMDA Members and Partners: October 2025 – September 2026
- Project Completion: September 2026

Pilot Sites

- Pennsylvania: 3
- North Carolina: 3

Chains:
- ALG Senior
- Saber
- UPMC
Structure of the Pilot

Teams in each site: medical director (where applicable), CNA or other front-line staff, director of nursing, etc.

Once a month:
- Hour long virtual meeting – part information/education, part group discussion and measures review
- Individual site 15-minute check in
- Data submission

Pilot Interventions

Residents:
- Adopt standard operating procedures
- Standing orders, prompts or reminders, offer onsite with regular calendar
- Address concerns of residents and families
- Create immunization champions/advocates

Staff:
- Offer vaccines on site at no cost
- Address concerns of staff
- Build trust between administration and front line staff
- Consider the impact of mandates
Pilot Interventions

Measures for Residents

**COVID-19**
- Fully vaccinated: 2 doses of Pfizer or Moderna vaccines or 1 dose of Janssen
- Up-to-date: 2nd booster: for adults age 50+ years old or ages 12 years & older who are moderately or severely immunocompromised
- Up-to-date: 1st booster for everyone else 12 & older

**Influenza**
- Once per year
- For 65+, consider an enhanced vaccine that has been shown to work better in older adults

**Pneumococcal**
- For 65+
- One dose of PCV20 or PCV15+PPSV23
- No need to revaccinate if they have previously received PCV13
- Give PCV15 or 20 if they have only received PPSV23 in the past

**Tdap**
- Once every 10 years
- When feasible, use Boostrix for 65+

**Shingles**
- For 50+
- RZV (Shingrix) is now recommended
- 2 doses, 2-6 months apart
- Should be given even if someone had shingles or was previously vaccinated with Zostavax
# Measures for Staff

## COVID-19
- Fully vaccinated: 2 doses of Pfizer or Moderna vaccines or 1 dose of Janssen
- Up-to-date: 1st booster for everyone 12 & older

## Influenza
- Once per year
- For 65+, consider an enhanced vaccine that has been shown to work better in older adults

## Hepatitis B
- Adults age 19-59
- 60+ with risk factors for Hepatitis B
- 2-dose, 3-dose, or 4-dose series, depending on vaccine or condition as recommended by the CDC

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# Website and Newsletter

- [www.movingneedles.org](http://www.movingneedles.org) and movingneedles@paltc.org

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General Resources

- Adult Immunization Schedule and Recommendations
- Vaccine Records and Immunization Information Systems
Thank You!

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