In 2011, following a review of core performance measures for residency training, the Johns Hopkins University (JHU) Residency Program acted to increase influenza and pneumococcal vaccination rates. The JHU Housestaff Patient Safety Council, consisting of residents of multiple specialties and Dr. Susan Peterson, Department of Emergency Medicine, Johns Hopkins Hospital, led the resident-driven initiative to improve adult immunization rates among patients at JHU hospitals.

A protocol was developed to give residents feedback on their individual performance on providing adult immunizations to their patients. From January 2012 through April 2013, the JHU Provider Order Entry (POE) system generated vaccine screening order sets for patients, and each resident’s performance on appropriate ordering of vaccines was reviewed to evaluate his or her competency in adult immunizations.

The project consisted of these elements:

• An order set for influenza and pneumococcal vaccines
• An educational module that reviewed CDC guidelines for influenza and pneumococcal vaccines and JHU’s ordering guidelines; the module was delivered to the residents by their peers and included a review of the appropriate use of the vaccine order set
• A quality improvement group conducted concurrent evaluation of immunization rates and provided feedback to residents on their performance
• A competition to reward the most successful and most improved departments.

This training program to improve adult immunizations subsequently became an integral component of residency training at JHU. This year, a new clinic handbook that includes information on the recommended adult immunizations will be used by JHU residents.

The Johns Hopkins University Resident Training Project
Improving Adult Immunization through Resident Physician Engagement

This resident training project to improve adult immunization rates among adult patients at JHU hospitals found:

• 90-100% compliance rates among residents for pneumococcal vaccine (Table)
• 94-100% compliance rates among residents for influenza vaccine (Table)
• Need for more focus on quality improvement through electronic health records and resident engagement
• Residency training programs can use electronic health record systems to improve adult immunization rates and coordination of care; this message should be articulated to EHR developers

Table. Percentages of residents at JHU hospitals who appropriately ordered adult immunizations (pneumococcal and influenza) for patients, January 2012–April 2013

This “What Works” vignette is one in a series of examples collected by the Provider Workgroup of the National Adult and Influenza Immunization Summit. For more information or to nominate an example of “what works” to improve adult immunization, go to http://www.izsummitpartners.org. This vignette does not constitute an endorsement from any of the organizations that participate in the Provider Workgroup or the NAIS.