Summit National Award Winners

Adult Immunization Publication Award

Recipient: University of Pittsburgh Vaccine Research Group (PittVax)

Presentation by:
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THE 4 PILLARS™ PRACTICE TRANSFORMATION PROGRAM

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The 4 Pillars™ Practice Transformation Program - History

- Based on 2 decades of health services research
- Tested successfully with pediatric flu, adult immunizations, adolescent immunizations
- Transformed from paper-based to web-based program

Evidence Base for Increasing Immunizations

- Community Preventive Services Task Force
  - Improving vaccination uptake requires behavior changes at the system, provider, support staff, and patient levels.

- Strategies should:
  - Increase demand
  - Improve access
  - Encourage providers to regularly administer vaccines
Evidence Base for Increasing Immunizations

- Sustainable change requires a coordinated, multi-pronged, adaptable approach.
- A successful practice improvement program will support change in diverse practice cultures.
- Motivation is a necessary component.
The 4 Pillars™ Program includes:

- Background materials
- 4 Pillars strategies
  - Convenience and Easy Access
  - Patient Communication
  - Enhanced Office Systems
  - Motivation by an Office Champion
- Case studies and best practices
- Resources
- Links to SOPs and other high quality immunization sites

The 4 Pillars™ Program helps practices to:

- Select strategies
- Organize roll out of strategies
- Access resources
- Track progress
Research on the 4 Pillars™ Practice Transformation Program

- RCCT and Pre-post studies in adults and adolescents
- Mixed methods study in adult practices
- Cost effectiveness of 4 Pillars Program in adults

Adult Results

- Over 70,000 adult patients with at least one visit in each of 3 years
- 24 practices completed study – 2 cities
- Diverse patient populations
- Increases in PPSV of 12-15 percentage points
- Increases in PCV of 3-12 percentage points
- Increases in Influenza vaccine of 3-6 percentage points
- Increases in Tdap vaccine of 6-8 percentage points
Mixed Methods

Aim:
- Determine practices’ readiness to implement the 4 Pillars™ Program

Methods:
- Interview staff about program
- Identify 4 practice characteristics
  - Degree of QI history
  - Communication and practice leadership
  - Immunization Champion leadership effectiveness
  - Organizational flexibility

Mixed Methods Results

- Score practices based on characteristics and group them by total scores
  - Low implementers had smallest changes in vaccination rates (3 percentage points)
  - High implementers had largest changes in vaccination rates (9 percentage points)
Lessons Learned

- Change is best if self-driven
- Time constraints require creativity to prioritize project
- Insufficient empowerment of Immunization Champions
- Delayed feedback
- Incomplete adoption of SOPs

Evolution of the 4 Pillars™ Program

- Changed the nature and number of introductory steps to increase engagement of the practice
- Increased leadership role of Immunization Champion
- Decreased the time to receive feedback and encouraged self-measurements of progress
- Shared ideas across sites
- Decreased barriers to using the website
4 Pillars™ Publications – 2014 and 2015


4 Pillars™ Publications - 2016


4 Pillars™ Publications - 2017

