Summit National Award Winners

Adult Immunization Publication Award

Recipient: University of Pittsburgh Vaccine Research Group (PittVax)

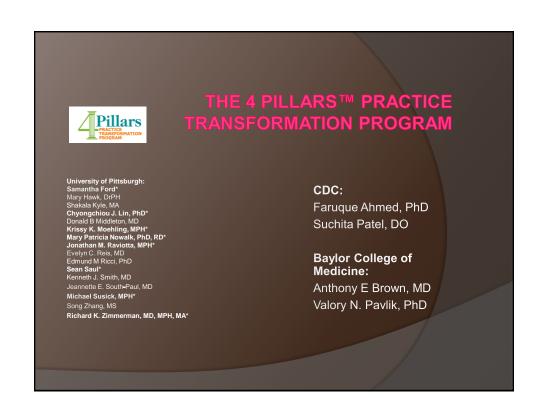


Presentation by: Mary Nowalk











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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 webbased 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 The April of Program

A step-by-drop guide to improving reaction optable in the program of the pr

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

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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)

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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

- Nowalk, MP, Nolan, BA, Nutini, J, Ahmed, F, Albert, SM, Susick, M, Zimmerman, RK. Success of the 4 pillars toolkit for influenza and pneumococcal vaccination in adults. *Journal for Healthcare Quality*, 2014; 36(6):5-15.
- Zimmerman RK, Nowalk MP, Lin CJ, Hannibal K, Moehling KK, Huang HH, Matambanadzo A, Troy J, Allred NJ, Gallik G, Reis EC. Cluster randomized trial of a toolkit and early vaccine delivery to improve childhood influenza vaccination rates in primary care. Vaccine. 2014 Jun 17;32(29):3656-63.
- Lin CJ, Nowalk MP, Zimmerman RK, Moehling KK, Conti T, Allred NJ, Reis EC. Reducing Racial Disparities in Influenza Vaccination Among Children With Asthma. J Pediatr Health Care. 2016 May-Jun;30(3):208-15.

4 Pillars™ Publications - 2016

- Smith KJ, Zimmerman RK, Nowalk MP, & Lin CJ. Cost-Effectiveness of the 4 Pillars Practice Transformation Program to Improve Vaccination of Adults Aged 65 and Older. *Journal of the American Geriatrics Society*, 2016; 65(4):763-768.
- Nowalk MP, Zimmerman RK, Lin CJ, Reis EC, Huang HH, Moehling KK, Hannibal KM, Matambanadzo A, Shenouda EM, Allred NJ.
 Maintenance of Increased Childhood Influenza Vaccination Rates 1 Year After an Intervention in Primary Care Practices. Acad Pediatr. 2016 Jan-Feb;16(1):57-63.
- Lin CJ, Nowalk MP, Pavlik VN, Brown AE, Zhang S, Raviotta JM, Moehling KK, Hawk M, Ricci EM, Middleton DB, Patel S, South-Paul JE, Zimmerman RK. Using the 4 pillars™ practice transformation program to increase adult influenza vaccination and reduce missed opportunities in a randomized cluster trial. BMC Infectious Diseases, 2016; 16(1), 623.

4 Pillars™ Publications - 2017

- Zimmerman RK, Moehling KK, Lin CJ, Zhang S, Raviotta JM, Reis EC, Humiston SG, Nowalk MP. Improving adolescent HPV vaccination in a randomized controlled cluster trial using the 4 Pillars™ Practice Transformation Program Vaccine. 2017 Jan 3;35(1):109-117.
- Hawk M, Nowalk MP, Moehling KK, Pavlik V, Raviotta JM, Brown AE, Zimmerman RK, Ricci, EM. Using a Mixed Methods Approach to Examine Practice Characteristics Associated With Implementation of an Adult Immunization Intervention Using the 4 Pillars Practice Transformation Program. *Journal for Healthcare Quality*, 2017; 65(1):114-122.
- Zimmerman RK, Brown AE, Pavlik VN, Moehling KK, Raviotta JM, Lin CJ, Zhang S, Hawk M, Kyle S, Patel S, Ahmed F, Nowalk MP. Using the 4 Pillars Practice Transformation Program to Increase Pneumococcal Immunizations for Older Adults: A Cluster-Randomized Trial. Journal of the American Geriatrics Society, 2017; 65(1), 114-122.

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