

# What Works

## To Improve Adult Pneumococcal Immunization 2016

### What They Did

This project aimed to increase pneumococcal vaccination rates (for any pneumococcal vaccine) among patients at three participating health systems in Indiana, Tennessee, and Virginia. The target groups were 104,482 seniors and 162,675 adults (18 through 64 years of age) who were at higher risk of pneumococcal infection.

Targeting the health care providers in these three health systems, this two-year project used the following strategies:

- Clinical Performance Dashboards (CPD), which displayed the data/populations (both numerically and graphically) of eligible patients who had not received pneumococcal vaccination. Each physician's clinical data were updated/refreshed every four months for two years, providing a way for physicians to compare their vaccination rates with those of their colleagues.
- Educational incentives and activities that addressed clinical gaps in practice. The project put in place continuing medical education (CME) credits through the University of Cincinnati and also offered eligibility for the Maintenance of Certification (MOC), Part IV. The project put in place continuing medical education (CME) credits through the University of Cincinnati and also offered eligibility for the Maintenance of Certification (MOC), Part IV, credits for American Board of Internal Medicine.
- Physician champions were identified at each participating health system to assess the data and consistently reevaluate progress toward the goals of increased immunization rates. Physician champions at each of the health systems actively engaged their care teams in discussions about the data reports.
- Monthly e-mail reminders were sent to participating physicians and their care teams to keep them informed of their rates and provide other educational updates.
- Faculty consensus meetings with representation from physician champions and others on the care teams focused on ways to improve immunization rates among the targeted patient groups.
- Two-year longitudinal outcomes report were populated with aggregate, de-identified data showing trends in pneumococcal immunization rates in each region and system-wide.

#### About the Project

A total of 320 primary care physicians and their care teams participated in this two-year project starting in April 2013. The three participating health care systems were:

- Community Physicians of Indiana (Indianapolis, Indiana)
- Holston Medical Group (Kingsport, Tennessee)
- Sentara Medical Group (Norfolk, Virginia)

Through this collaboration:

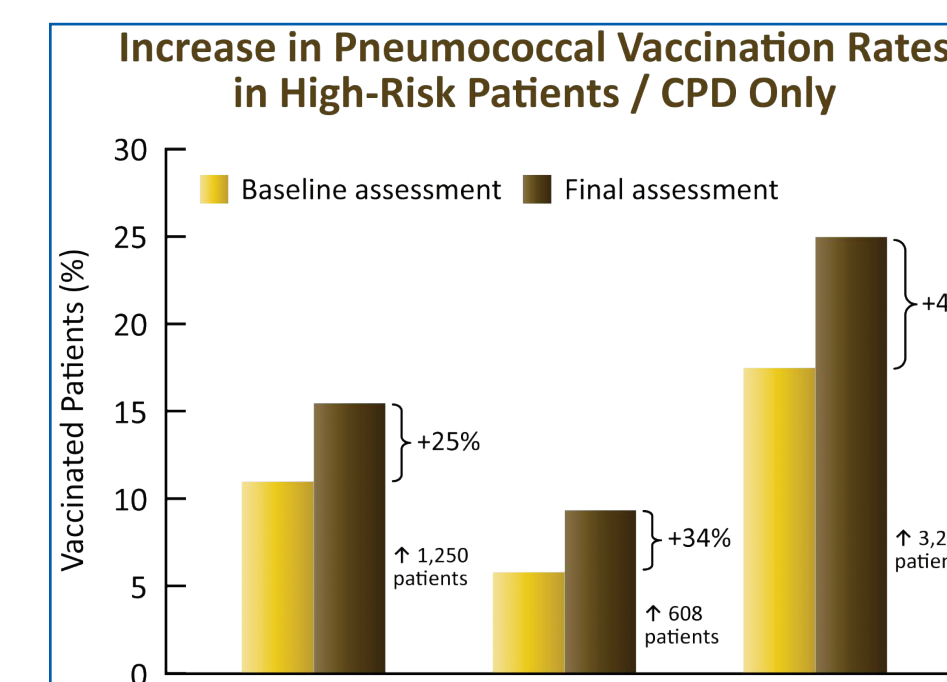
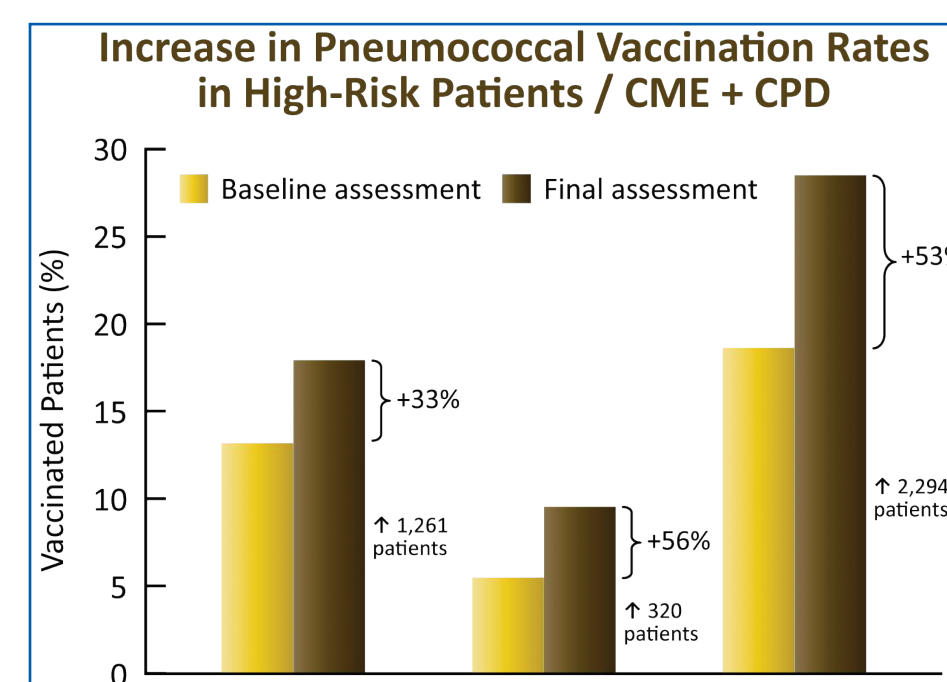
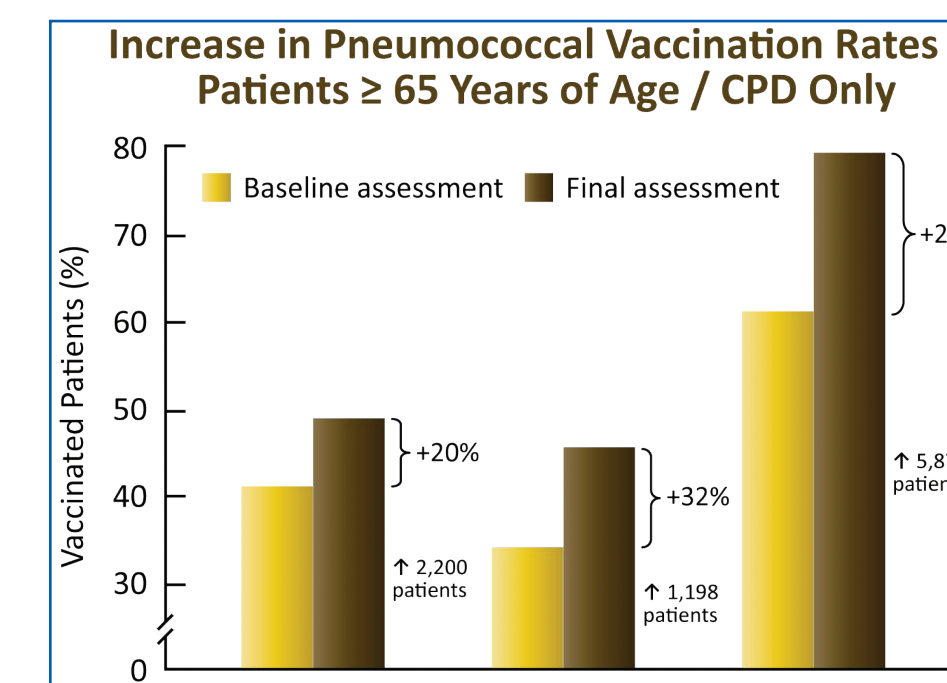
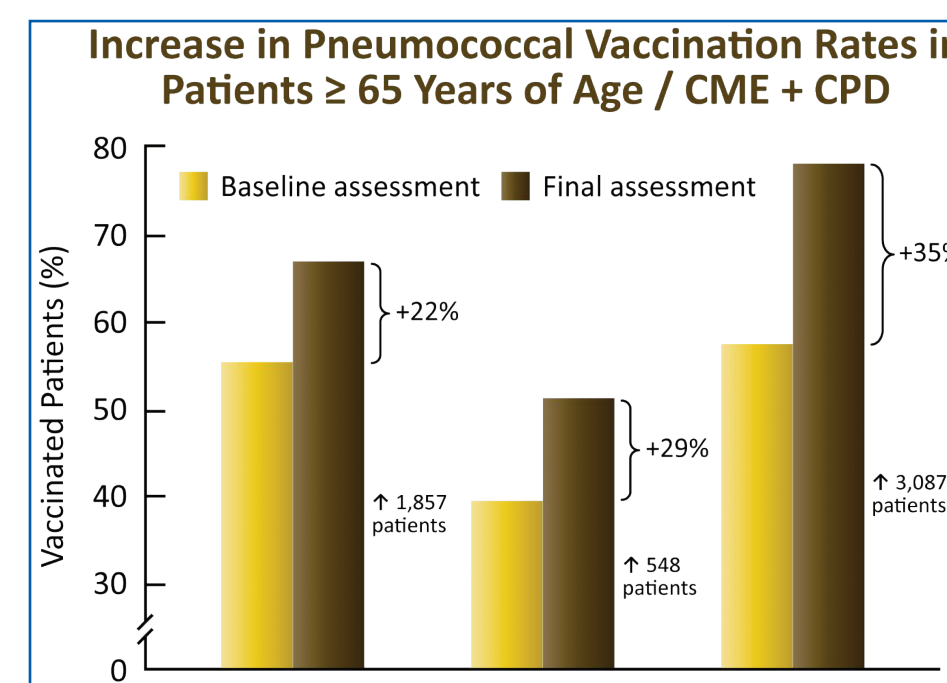
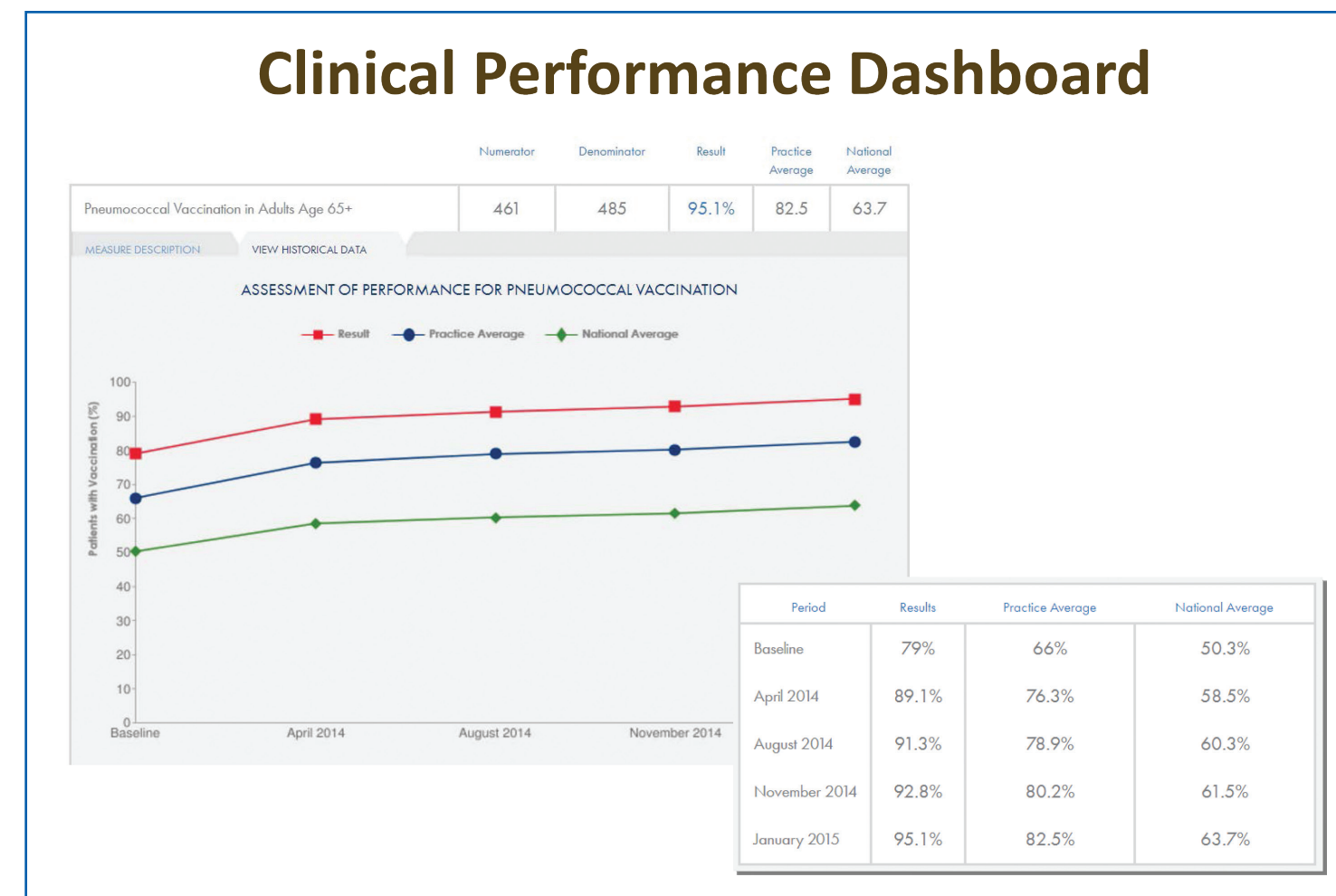
The University of Cincinnati Office of Continuing Medical Education provided CE credit.

Direct One Communications and Confluent Healthcare Solutions developed and managed the learning activities, the Clinical Performance Dashboard, the Learning Management System, and the Faculty Consensus Meetings.

Humedica/Optom and the American Medical Group Association reported all clinical data for participants at baseline and through each quarterly refresh.

The program was supported by an independent medical education grant through Pfizer.

### Using Population Health Outcomes Data to Increase Adult Pneumococcal Vaccination Rates



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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 NAIIIS.

### Results They Got

Vaccination rates increased among the patients served by the three participating health systems, ranging from 20% in one health system to a high of 53% in another.

- Physicians with access to the Clinical Performance Dashboard alone improved pneumococcal vaccination rates by 20% to 42%.
- Physicians with access to the Clinical Performance Dashboard and who ALSO earned continuing education credits achieved higher rates, improving pneumococcal vaccination rates by 22% to 53%, especially among younger patients at high risk.
- Nearly one-third (103/320) of the primary care physicians completed all elements of the program and received credit for CME and MOC, Part IV. The program achieved both Moore's Level 5 (Performance) and Level 6 (Patient Health Status), as required by the Accreditation Council of Continuing Medical Education.
- The graphs show how the use of the Clinical Performance Dashboard (CPB) PLUS the achievement of CME was associated with higher immunization rates, compared with those physicians who used just the Clinical Performance Dashboard alone.

