Increasing Adult Immunization Rates Among Diverse Populations

Laura Lee Hall, PhD
The Importance of Vaccination in Community Health: Promoting Equity in Adult Immunization

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• Panelists: Bernard M. Rosof, MD, MACP CEO, Sustainable Healthy Communities, LLC

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Sustainable Healthy Communities, LLC

• Wholly-owned subsidiary of NMQF
• Exclusive publishing rights for NMQF databases, including 15 years+ of complete Medicare and Medicaid dataset analyses
SHC Vision and Mission

• SHC’s vision statement is: Sustainable healthy communities in every zip code.
• SHC’s mission is to promote sustainable healthy communities, especially those with diverse and underserved populations, through the provision of actionable data, research, and engagement of clinicians and community leaders.
Adult Influenza Immunization, NHIS

18–64

- White only, not Hispanic
- Hispanic or Latino
- Asian only, not Hispanic
- Black only, not Hispanic

65 and over

- White only, not Hispanic
- Asian only, not Hispanic
- Hispanic or Latino
- Black only, not Hispanic

Percent

1999 2014
Figure 4.3. Percentage of persons aged 6 months and over who received an influenza vaccination during the past 12 months, by age group and race and ethnicity: United States, January–September 2016

DATA SOURCE: NCHS, National Health Interview Survey, January–September 2016, combined Sample Adult and Sample Child Core components.

- For children aged 6 months–17 years, the percentage by race and ethnicity who received an influenza vaccination during the past 12 months was 53.5% for Hispanic children, 49.1% for non-Hispanic white children, and 51.2% for non-Hispanic black children.
- Hispanic children aged 6 months–17 years were more likely to have received an influenza vaccination during the past 12 months than non-Hispanic white children aged 6 months–17 years.
- For adults aged 18 and over, the percentage who received an influenza vaccination during the past 12 months was 32.5% for Hispanic adults, 46.5% for non-Hispanic white adults, and 37.5% for non-Hispanic black adults.
- Non-Hispanic white adults were more likely to have received an influenza vaccination than non-Hispanic black adults and Hispanic adults.
SHC Clinician Network

- Recruit and train minority- and underserved community serving clinicians, with a focus on primary care physicians
  - In collaboration with interested medical societies
  - Recruitment guided by maps: where is the need; where are the providers; where are the champions – WHERE ARE THE SUPER IMMUNIZERS
- Learn, do, coach model of training
  - Developed at ACP and proven effectiveness in terms of improved outcomes and clinician engagement
  - Champion training focused on understanding how to implement an improvement plan based on data
    - SHC can provide the data
  - Practice teams receive hands-on support in implementing change through in-person meetings, webinars, coaching calls, and index data
  - High retention (80% plus) and satisfaction (very/extremely satisfied >90%)
Learn, Do, Coach Effectiveness

Figure 1. Linking practice assessment data to performance measure outcomes. CSA, controlled substance agreement; UDT, urine drug test.

SHC Community Network

• Adapt clinician training approach to cultivate community champions
  • Organically arose from clinician network

• Roles includes:
  • Leadership for community project
  • Providing input on community assets and needs
  • Community education
  • Implement community project
CDC Guide for Promoting Health Equity through Community Engagement

Figure 3.1: Phases of a Social Determinants of Health Initiative
NMQF, ACP, and QHC Advisory Group partner to increase adult immunization rates among underserved populations

Washington, D.C., September 6, 2016 -- The National Minority Quality Forum (The Forum), American College of Physicians (ACP), and QHC Advisory Group (QHC) are partnering to create a network of physicians who provide care to minority and underserved populations.

The immediate purpose of the collaboration is to support health equity by reducing adult immunization disparities. The collaboration also seeks to support minority-serving practices in meeting the requirements of value-based payment reforms.
## Year 1 Goals

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<th>Goal</th>
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<tr>
<td>Immunization data mapping</td>
<td>NMQF</td>
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<td>Environmental scan and literature review</td>
<td>QHC Advisory Group</td>
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<tr>
<td>Focus group/qualitative study of super-immunizers</td>
<td>LSU School of Public Health</td>
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<td>Engagement and QI with identified ACP members serving minority communities</td>
<td>ACP</td>
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New Initiative

• Probes the literature on evidence-based approaches to improving immunizations in diverse communities
• Tests a different data source: Medicare claims data
• Identifies and probes “super-immunizers” among minority-serving physicians – how, what, and why do they do it?
• Applies QI approach to improvement, with super-immunizers as peer coaches
Advisory Group

- **Chair - Wayne J. Riley**, MD, MPH, MBA, MACP, Past President, ACP
- **Marshall Chin, MD, MPH**: Richard Parrillo Family Professor of Healthcare Ethics; Department of Medicine; Director of the Chicago Center for Diabetes Translation Research; University of Chicago
- **John Couk, MD**: Chief Medical Officer, LSU Health Care Services Division
- **Mary Daniels**: Executive Director, Georgia ACP Chapter
- **Frances Ferguson, MD, FACP**: Internist, Albany Area Primary Health Care
- **Laura Lee Hall, PhD**: COO, SVP, Sustainable Healthy Communities, LLC
- **Romana Hasnain-Wynia, MS, PhD**: Chief Research Officer at Denver Health
- **Jim Hotz, MD, MACP**: Albany Area Primary Health Care
- **Wendy Nickel, MPH**: Director, Centers for Quality and Patient Partnership in Healthcare, ACP
- **Patrick Malohney, MPH**: Epidemiologist, LSU School of Public Health
- **Suja Mathew, MD, FACP**: Governor, Northern Illinois ACP Chapter; Chair of Medicine, Cook County Health & Hospitals System
- **Monica Peek, MD, MPH**: Associate Professor of Medicine; Associate Director, Chicago Center for Diabetes Translational Research, University of Chicago Medicine
- **Gary Puckrein, PhD**: President and Chief Executive Officer, NMQF
- **Bernie Rosof, MD, MACP**: CEO, QHC Advisory Group
- **Tabassum Salam, M.D., FACP**: CHCQM: Senior Physician Advisor, Population Health Medical Director, Care Link Services, Christiana Care Health System
- **C. Michael Soppet, MD, FACP**: Internal Medicine for Alabama, Dothan, Alabama
- **Tracy Wang MD, MHS, MSc**: Director, Center for Educational Excellence; Fellowship Associate Program Director; Associate Professor of Medicine, Cardiology; Duke Clinical Research Institute
- **Selam Wubu**: Senior Associate, Center for Quality, ACP
Conclusion: The current evidence base supports the importance of systems change at the practice level as well as better integration of health literacy approaches to reduce AI disparities. Still, there is insufficient evidence that identifies specific approaches to improving AI in minority populations and reducing disparities, highlighting the need for further research. In the meantime, enhanced support to primary care practices serving minority populations, educating and partnering with community members, and addressing communications barriers—particularly those related to language and health literacy—are called for given the large and potentially growing disparities in AI.
Want to Join the Effort? Contact me at lhall@shcllc.info