



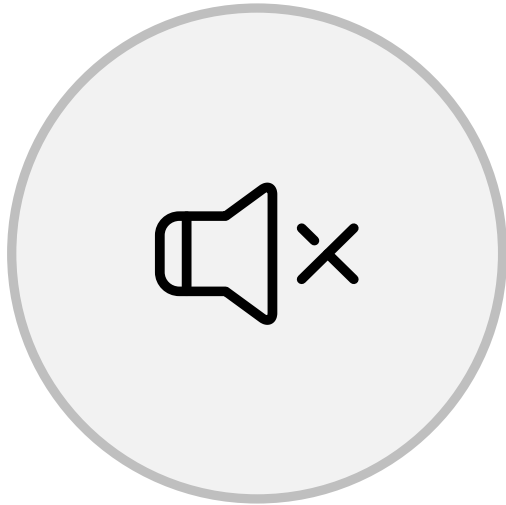
AIRA
AMERICAN IMMUNIZATION
REGISTRY ASSOCIATION

Monitoring/Controlling, Closing, Sustaining Reminder/Recall

Tuesday, February 18, 2020

3 PM ET

Before We Get Started



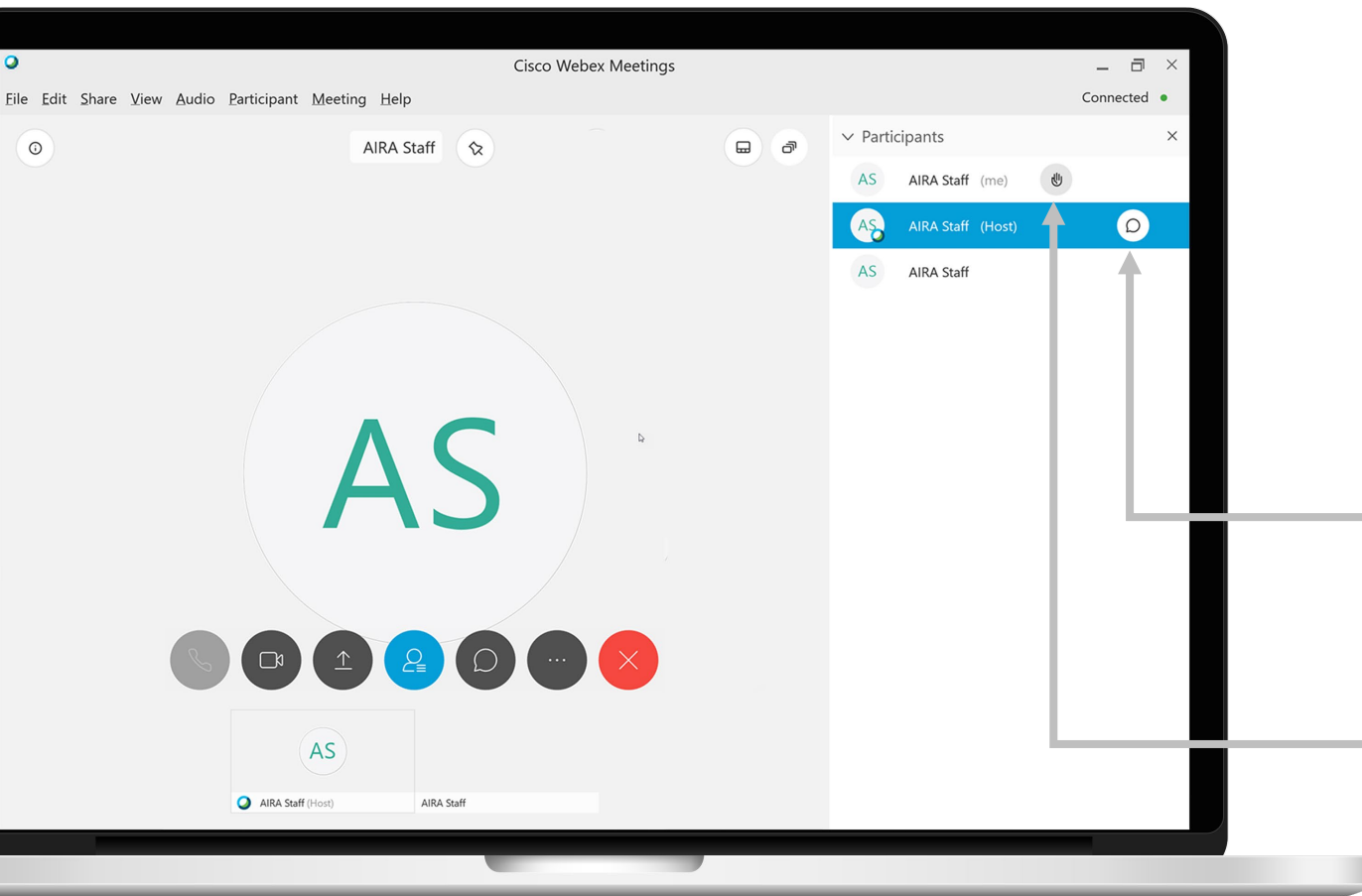
All phone lines
are muted



This meeting is being recorded
and will be posted on the
AIRA repository

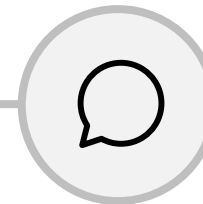


Question & Answer

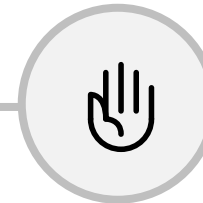


• How do I ask a question?

- There will be time allotted for Q&A following the presentation, to unmute your line **press *6**
- Via WebEx:



Select the chat icon next to the host and type question into the chat box.



Select the hand icon next to your name and you will be called on.



Today's Speakers

- Sydney Kuramoto, Minnesota
- Alyssa Strouse, Michigan
- Amy Metroka, New York City



Press *6 to unmute your line





Welcome & Brief Recap of Reminder/Recall Toolkit

University of Colorado

Summary



How this series
will help you in
your day to day
lives



IIS community's
involvement

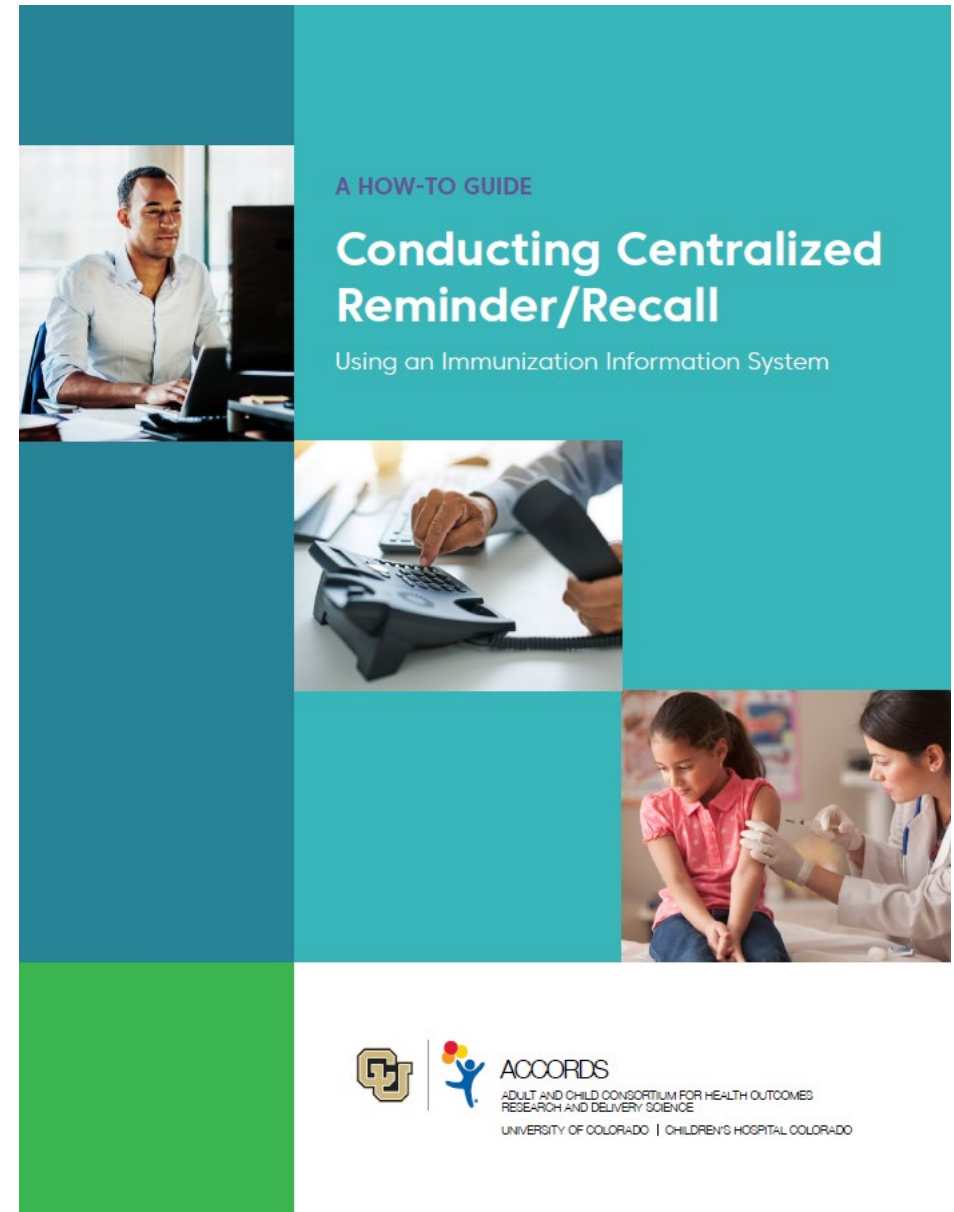
Project
summary



Toolkit

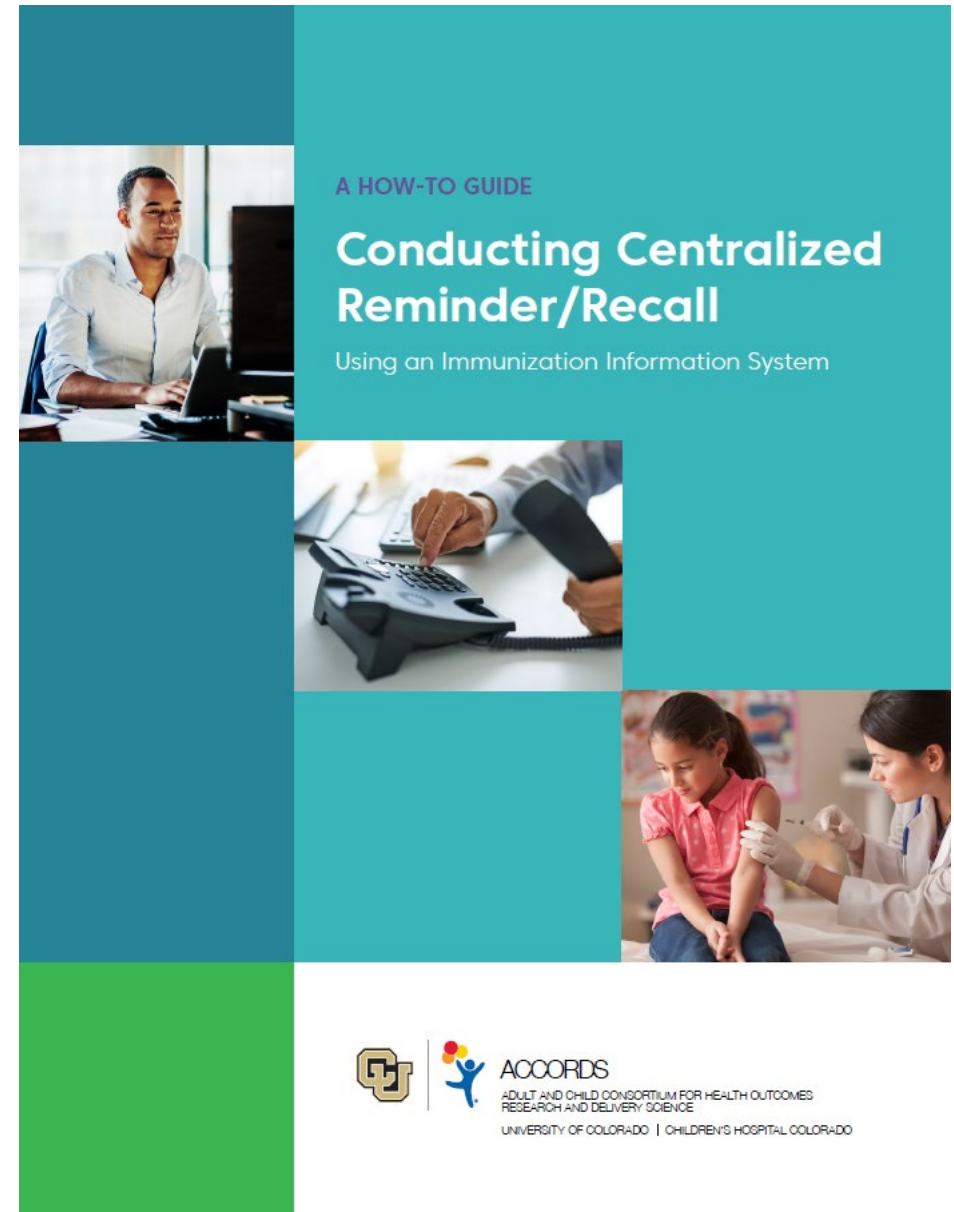
- Available on the AIRA repository!
- Search “toolkit”

Process for Implementing a Centralized IIS-based R/R Project



Toolkit Purpose

- Help you implement and sustain IIS-based centralized reminder

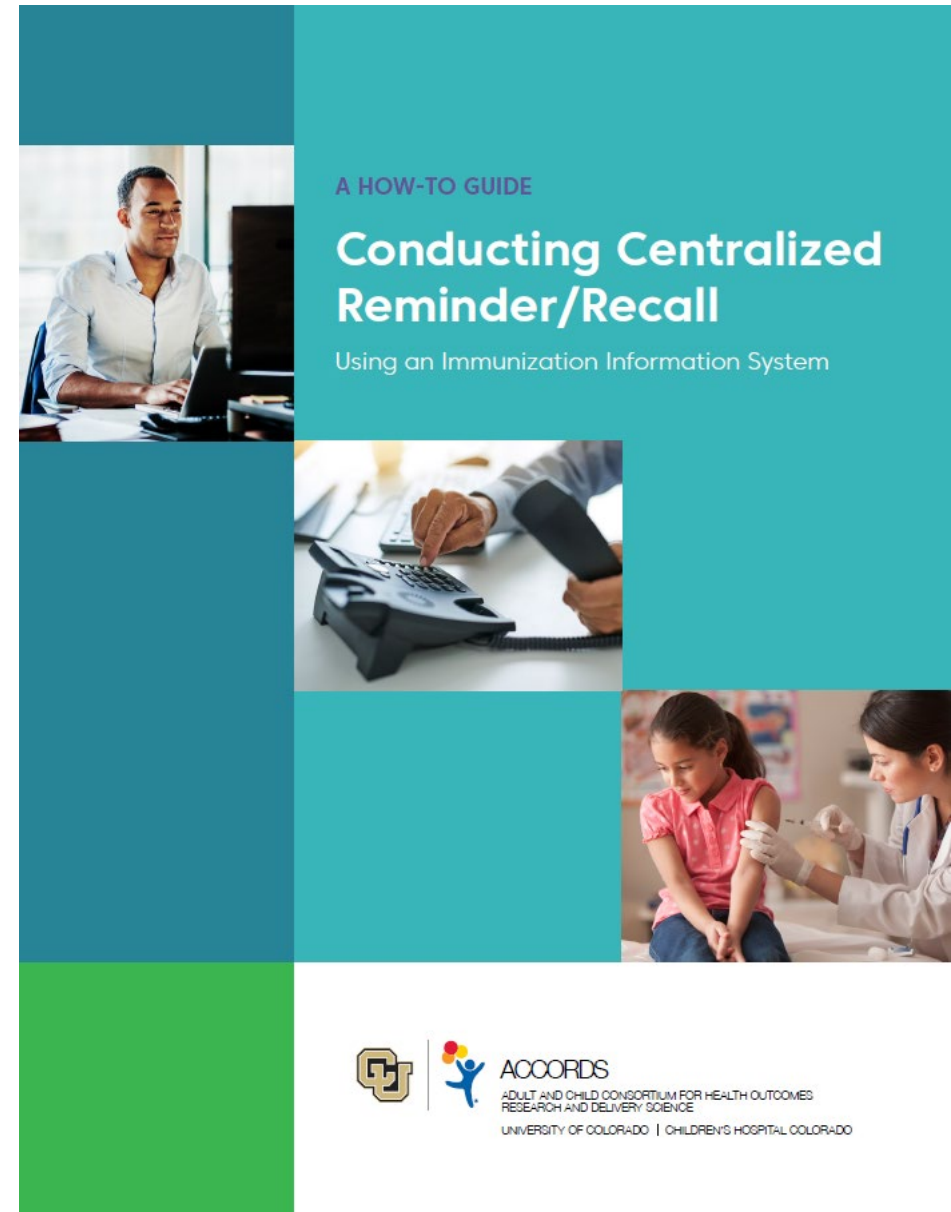


Toolkit Development

- Collaborative Work!
 - University of Colorado research staff who have conducted CI-R/R studies since 2009
 - Colorado IIS staff
 - AIRA staff
 - Three additional IIS Managers

Available on AIRA Repository

https://repository.immregistries.org/files/resources/5d43264137042/accords_centralized_reminder-recall_toolkit.pdf



Toolkit Contents

Today: Implementing Centralized R/R

- Initiating
- Planning
- Executing

Next Week: Implementing & Sustaining R/R

- Monitoring & Controlling
- Closing
- Sustaining

Contents

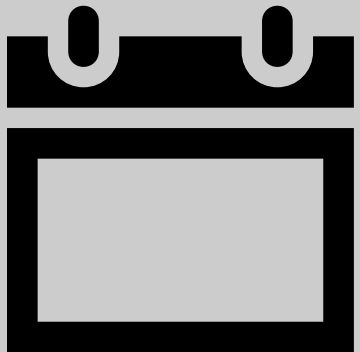
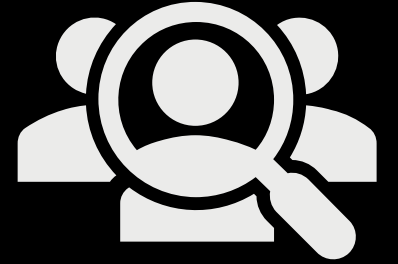
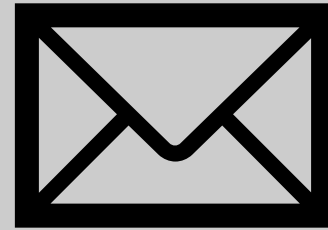
4	Executive Summary
5	Background: Reminder/Recall Interventions Improve Vaccination Rates
6	Centralized IIS-based R/R
7	Get Familiar with your IIS!
8	Not a Health Department or an IIS? Not a Problem!
9	How Do You Implement Centralized IIS-based R/R?
11	Initiating
12	Planning
13	Consider your Population or Immunizations of Focus
14	Consider Factors Affecting Budget
17	Unique Vaccines: HPV and Influenza (Seasonal and Pandemic)
20	Communicate with Stakeholders
21	Understand your Patient Population
23	Develop R/R Materials
25	Executing
25	Running the R/R Report
26	Generic Steps for Launching
27	Monitoring and Controlling
27	Managing Reminders
28	Evaluating the Results
29	Closing
31	Sustaining Centralized IIS-Based R/R Efforts for the Long Haul
32	Resources



Monitoring/Controlling

Sydney Kuramoto, Minnesota





Brief Overview of Reminder/Recall at Your IIS



Managing Responses to Reminder/Recall

- What did you do if parents called or emailed about the reminders you sent out?
 - Developed document for triaging calls
 - Developed FAQ sheet for calls
- How did you handle providers or practices that called with questions about centralized reminder/recall?
 - Direct to reminder/recall coordinator
 - Do pre-communications before reminder/recall to providers/practices.



Updating Records

- Did you update IIS records as part of this centralized reminder/recall?
 - Yes
- If so, how? If not, why not?
 - If parent/guardian provided a immunization history from a provider.



Review and Evaluate

- Did you measure your results?
 - Yes
- If so, how did you measure results? What did you find?
 - Undeliverable mail
 - Opt-outs
 - Vaccination status
- If not, why not?



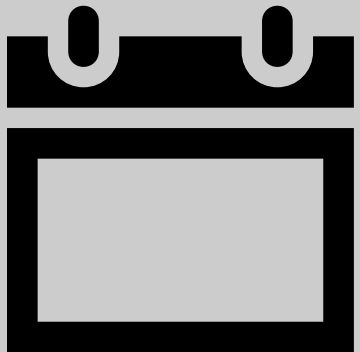
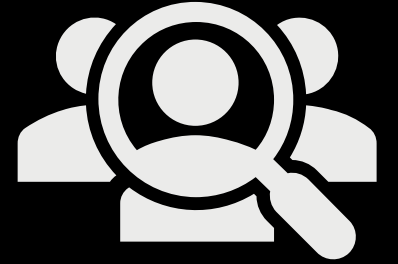
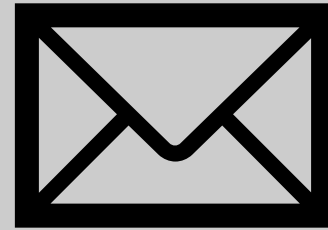
Other IIS Perspectives



Closing

Alyssa Strouse, Michigan





Brief Overview of Reminder/Recall at Your IIS



Lessons Learned

- Identified ways to streamline the process within the division and the department
- Identified errors with 2D Barcode scanning of RTS letters
 - Distinguishing RTS letters based on USPS yellow sticker
 - Person no longer at this address
 - Invalid USPS address
- Evaluation of IIS R/R report data indicates success
 - Number of Vaccinations Resulting from Recalls
- Ability to conduct recalls on a large (>30,000 letters) scale



Stakeholders

- Communicate with partners before and after centralized R/R
 - Identify regions being recalled, vaccine type, dose #, targeted ages and total number of letters generated
- Generate R/R evaluation reports via the IIS to share with partners
 - Total number of vaccinations resulting from recalls
 - Number of specific vaccinations resulting from vaccine-specific recalls (i.e. HPV vaccinations from HPV recall)
- Identify and communicate cost effectiveness and overall public health benefit of R/R



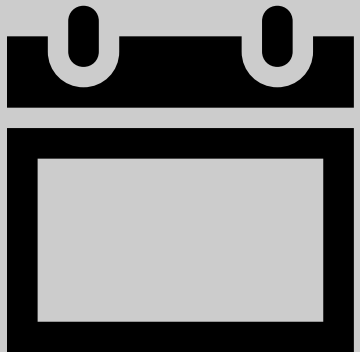
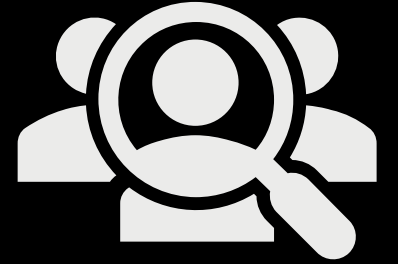
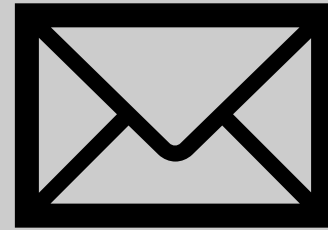
Other IIS Perspectives



Sustainability

Amy Metroka, New York City





Brief Overview of Reminder/Recall at Your IIS



Overview of Centralized R/R in NYC

- Before 2015, used letters and post cards
 - Collaborated with Medicaid Managed Care Organizations
- Currently, use text messages for centralized recall
 - Approved by Office of General Counsel in 2015
 - No consent or opt-in required
 - Text messages must contain:
 - Our name: DOHMH
 - 311 phone number
 - No personal identifying information
 - Opt-out option: "To stop reminders, text STOP"
- Providers can still use IIS to generate letters and lists of phone numbers for recall



Methods

- Populate mobile numbers in IIS fields used by IIS Online Text Message Tool
 - Use vendor, Interactive Marketing Solutions, to identify mobile numbers in home phone field, then populate in mobile field
- Select cohort based on age, vaccine(s) missing, last address in NYC, not marked Moved Or Gone Elsewhere (MOGE), active (based on when last immunization was received), mobile number present, had not opted-out of text messages
- Import cohort into IIS Tool
 - Vendor, Upland Mobile Commons, sends text messages using short code
- Monitor responses using vendor dashboard
- Evaluate impact



Sample Text Message

DOHMH SMS, 311: The Health Department recommends that your child/children receive an annual flu shot. Call your doctor today! To stop reminders, text STOP.



Centralized Influenza Vaccine Recall

Sent text messages to parents/guardians of children 15 months to 18 years of age who did not receive a flu vaccine in 2016-17 and had not yet received a flu vaccine in 2017-18

- Results: Small impact on vaccine uptake among children <5 years
 - Challenging population and vaccine
- Lessons learned: ~1/3 of messages did not get delivered
 - Inactive phone numbers
 - Some wireless carriers/plans have default short code message blocking
 - Opt-out rate ~5%



Maintenance: Funding

- Used CDC supplemental PPHF funding to build IIS Text Message Tool
- Cover staff costs with annual CDC Cooperative Agreement and Medicaid funding
- Cover vendor costs with local (NYC) funding
 - \$2,500/year for Interactive Marketing Solutions
 - \$10,000/year for Upland Mobile Commons (our share of agency-wide costs)
- Awarded NYC funds in 2020 to expand IIS Text Message Tool for Healthy Homes Program (formerly called the Lead Poisoning Prevention Program) to promote lead testing of all children at 1 and 2 years of age



Maintenance: Staff, Leadership, Stakeholders

Staff:	<ul style="list-style-type: none">• 2 IIS staff (CDC CoAg-funded) each spend an estimated 10% of their time to implement and monitor centralized text message recall jobs and periodically populate mobile phone numbers• 3 IIS onboarding staff (Medicaid-funded) facilitate provider reporting of mobile numbers as part of routine onboarding and data quality activities
Leadership:	<ul style="list-style-type: none">• Health Department Bureau of Immunization (BOI) Assistant Commissioner/Immunization Program Manager
Stakeholders:	<ul style="list-style-type: none">• Health Department Bureau of Immunization, Healthy Homes Program



Pros

- Centralized text message recall can be used to reach patients without a current medical home
- IIS Text Message Tool can reach large populations at low cost
- Health Department may have more resources for implementing recall than many providers



Cons

- In general, provider-based messages may be better received by public
 - Providers can control when to recall and manage patient scheduling accordingly
 - Provider contact information to schedule appointment is at receiver's fingertips
- Mobile numbers not available for all patients
 - Capture of mobile numbers in IIS is improving
 - e.g., 54% of 12-year-olds have parent/guardian mobile number
- Reviewing/managing replies to messages may not be feasible
 - e.g., "My child already received a flu shot this year"



Next Steps

- Make changes needed to improve text message process
 - Modify database structure to add additional tracking and logging of mobile number source
 - We want to avoid replacing a mobile number updated by a provider
 - Work with vendor to add additional languages
 - Address problem with short code filter
 - Consider sending text messages via long code
- Planning a large HPV vaccine text message project
 - Seeking to promote HPV vaccine completion by 13 years of age



Centralized Versus Provider-Based Recall: Complementary or Redundant?

Complementary	
Centralized	<ul style="list-style-type: none">• Draws on Health Department resources – limited, but may be more feasible than for many providers
Provider-based	<ul style="list-style-type: none">• Draws on provider resources – many providers are under-resourced and cannot take on reminder/recall activities
Redundant	
<p>Use of each method is limited; not redundant at this time. An average of 100 provider sites (of ~1,600) use IIS Text Message Tool (typically same facilities) per month and send an average of ~65,000 messages per month.</p> <p>We will keep providers informed of centralized recall projects to prevent redundancy.</p>	



Other IIS Perspectives





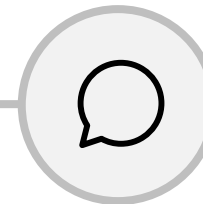
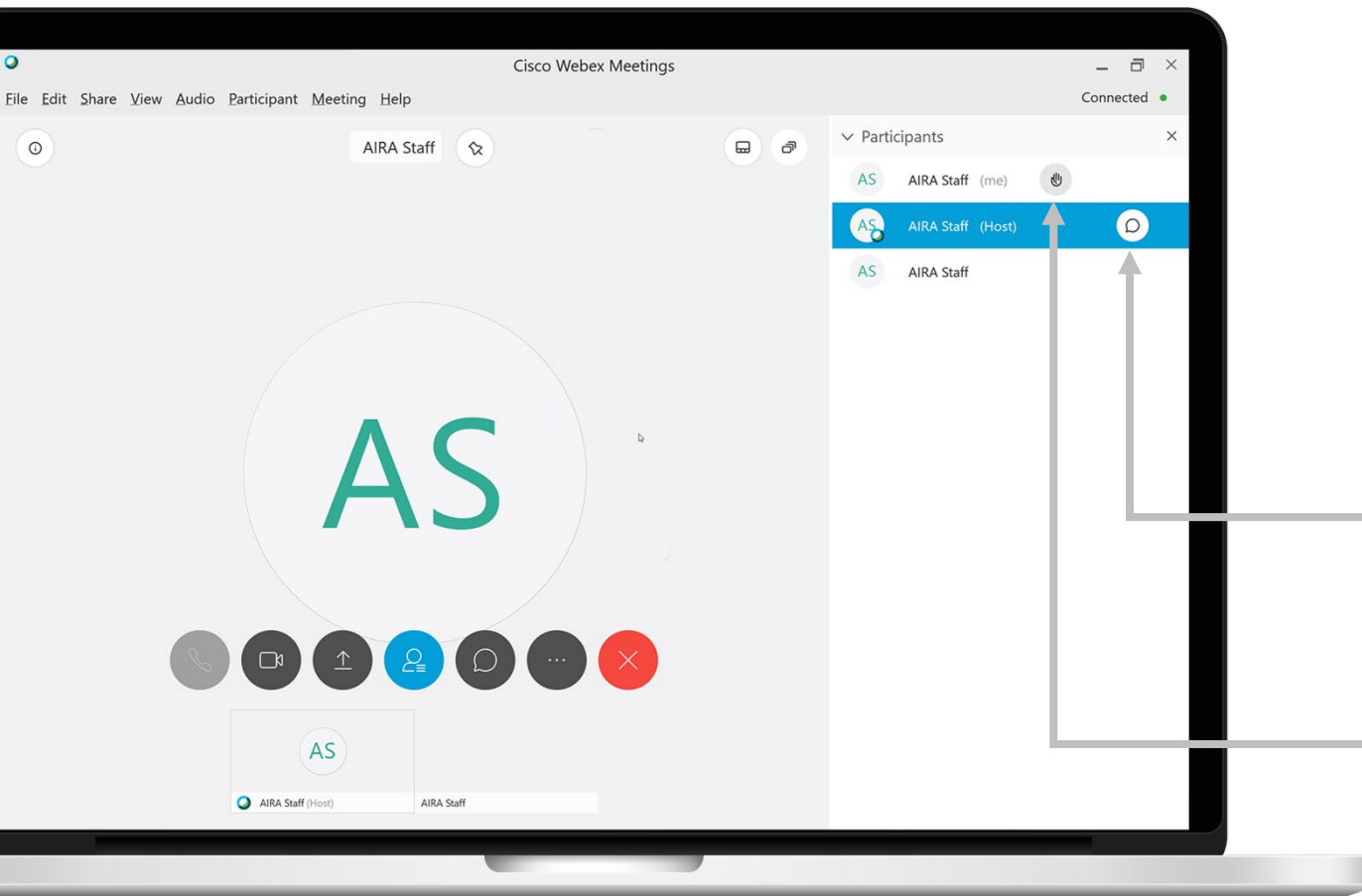
Questions?



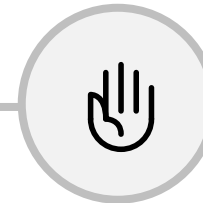
Questions, Comments, Discussion?

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Thank you to our presenters,
and thanks to all of you for
joining us!

A brief evaluation survey will be sent out following this
webinar.

