AIM of this project Describe the aim of this project. What are you trying to accomplish? Every aim will require multiple small tests of change.

Over the next 3 months, among our patients seen at ages 2–24 months, we will:

- Increase the incidence of screening for contraindications to 100%.
- Eliminate any administration of vaccines if a true contraindication is present (0% of vaccine are given if true contraindication is present).
- Decrease the number of missed opportunities to vaccinate due to following incorrect contraindications and/or using precautions too liberally (90% of vaccines are given when due).

Plan

Describe the proposed test. What performance gap will it address? What idea will you test? What barriers will you need to overcome? What do you predict will happen?

Performance Gap

<table>
<thead>
<tr>
<th>Test Case</th>
<th>Baseline Number</th>
<th>Week 1 Number</th>
<th>Goal Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Documentation of a screening for contraindications</td>
<td>10/20 (50%)</td>
<td>14/20 (70%)</td>
<td>20/20 (100%)</td>
</tr>
<tr>
<td>Vaccine given when a true contraindication was found</td>
<td>1/20 (5%)</td>
<td>0/20 (0%)</td>
<td>0/20 (0%)</td>
</tr>
<tr>
<td>Vaccine given when no true contraindication is present</td>
<td>15/20 (75%)</td>
<td>15/20 (75%)</td>
<td>18/20 (90%)</td>
</tr>
</tbody>
</table>
Plan continued from page 1

Idea for Test
An additional 2 MAs and 2 providers will begin using the mandatory screening questionnaires, before the provider sees the patient.

Barriers:
Dr D has voiced opposition to the EMR and struggles to use it. He may not be inclined review the questionnaire electronically.

Measures

What is the desired goal that will close the performance gap?
*Describe the specific measures that will determine a successful outcome for the test.*

We want to make sure that vaccines are always delivered safely and on-time unless true contraindications exist. Making sure we screen for contraindications and precautions will keep kids safe and knowing what truly are and are not contraindications will make sure vaccines are delivered on time as often as possible.

Tasks and Tools

<table>
<thead>
<tr>
<th>People</th>
<th>Tasks</th>
<th>Tools</th>
</tr>
</thead>
</table>
| Dr B.                   | Meet with all participating practitioners to discuss how to use the screening questionnaires and follow only true contraindications | [www.immunize.org](http://www.immunize.org)  
                          |                                                                      | [http://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/contraindications.html](http://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/contraindications.html) (Table 4-1 and Table 4-2) |
| Aaron (project manager) | Meet with all the RN and MAs and talk about this at weekly staff meeting and go over the need to screen for needed vaccines and flag the screening questionnaires |                                                                      |
| Ashley, RN              | Review 20 charts to determine which patients need vaccines           | By checking the appointment list                                      |
| Dr B.                   | Review charts to determine if all patients due for vaccines received them. If so, were any contraindications present? If not, were only true contraindications followed? | By reviewing charts and comparing notes to contraindication tables |
| Dr B.                   | Measurement as described                                             | EMR or paper charts                                                    |

Predicted outcome: Predict what will happen when the test is carried out? Describe your plan for change. List the tasks and tools needed to perform the test:

- Aside from documenting contraindication screenings we won’t see any big changes, per se.
- Most kids don’t have true contraindications, so we will need to see a lot of patients before our numbers budge. This puts an emphasis on the act of screening, and understanding the true contraindications and precautions.
Do

Make a change! Try your change with a few patients over a short period of time. Collect data that can be measured. Describe what happened when you ran the test.

We are trying again with more physicians. Hopefully over time we will see enough patients to see our measurements affected by our changes.

Study

Did the change lead to the desire improvement? Describe how the measured results compare to the predicted outcome.

- We are seeing an increase in documenting contraindication screenings.
- One measure is not responsive to our short-term actions, which is frustrating.
- This week, we had a problem with MAs forgetting to mark it if a parent “refused” the vaccine. Knowing if a lot of parents are refusing is a good balancing measure.

Act

Describe how you will modify the plan. In the next test cycle based on “learnings” from this cycle. Or, describe a new idea to test to help you achieve your aim.

- Consider: For our second 2 measures, we are considering changing our denominator to only children at sick visits, at which their acute illness might be perceived as a contraindication/precaution. This may help us better see if our change is affecting these patients. We are going to continue to measure screening rates for all visits.
- Follow up: After two trials, we are ready to expand to 6 of our 10 providers.

End of Cycle 2