

## Example 7, Contraindications: DO, STUDY & ACT phases

### MODEL FOR IMPROVEMENT

Team Name: ABC Pediatrics

# Plan a Test of Change

Cycle #: \_1\_ Start Date: 1/4/13 End Date: 1/4/13

### Objective for this PDSA Cycle (Aim):

By April 1, 2013, our practice will properly screen all patients for true contraindications and precautions and increase the number of children receiving vaccines during sick visits by 100%.

### PLAN:

#### QUESTIONS

Does our staff know what true contraindications and precautions for vaccine administration are? Will they be able to independently screen for true contraindications? Will our staff be comfortable administering vaccines to children who come for sick visits?

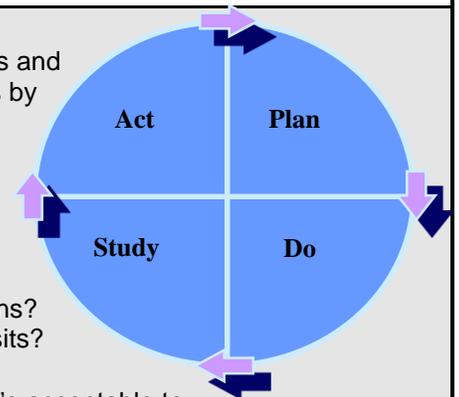
**PREDICTIONS** Our staff will need education on true contraindications and when it's acceptable to vaccinate a sick child. Not all staff will be able to independently screen patients.

#### PLAN FOR CHANGE OR TEST: WHO, WHAT, WHEN, WHERE

During next Thursday's medical staff meeting, staff will watch the CDC's webinar on Vaccine Contraindications and Precautions, (from Session 2 of the Epidemiology & Prevention of Vaccine-Preventable Diseases webinar series) and then role play several situations of true not true contraindications. Vivian, the office manager, will laminate and post copies of the Guide to Contraindications and Precautions by Friday in all the exam rooms and the triage room. Starting Monday, the front desk staff will give patients the screening checklist to fill out while they wait.

#### PLAN FOR COLLECTION OF DATA: WHO, WHAT, WHEN, WHERE

At the end of the day (Monday), Donna, the nurse manager, will review the records of patients who came in for sick visits to see if they were due for vaccines and if they were, were the vaccines given.



**DO: CARRY OUT THE CHANGE OR TEST; COLLECT DATA AND BEGIN ANALYSIS. REPORT THE RESULTS OF YOUR TEST HERE.** Describe observations, problems encountered, and special circumstances.

Staff were engaged with the learning session and seemed to understand that having a cold or minor illness did not preclude patients from getting vaccines, although 1 or 2 continued to express hesitancy. Front desk staff were instructed to give a screening sheet to all patients and complained about the wasted paper since not all patients were there for vaccines. Sheets were left lying around all over the office. Several parents were hesitant about their child getting vaccines at a sick visit.

### STUDY: COMPLETE ANALYSIS OF DATA; SUMMARIZE WHAT WAS LEARNED

15 patients were seen for sick visits by Dr. Miller on Monday. Of those, 5 were eligible to receive vaccines on that visit. 3 were vaccinated. 1 was not vaccinated because mom and dad felt the child was "too sick" and 1 was not vaccinated because a PPD was also ordered for daycare entry.

Need to continue to educate staff about true contraindications so that they are comfortable educating parents. Need to better plan at what step in the visit the screening sheet is distributed.

### ACT: ARE WE READY TO MAKE A CHANGE? Modifications or refinements to the test? PLAN FOR THE NEXT CYCLE

Not ready to make change yet. Modifications for Cycle #2 – On Tuesday, Dr. Miller and Dr. Maxwell's patients will get the screening forms. If they order vaccines, they will hand the patient the screening sheet to fill out while they wait for the MA. A 10-minute vaccine education session will be a part of the next 3 monthly medical staff meetings to help staff gain knowledge and education about true contraindications and precautions.