Chapter Quality Network (CQN) Improving Childhood Immunizations Project (ICHIP): Recruitment Packet

We invite you to join the CQN Improving Childhood Immunizations Project, sponsored by the American Academy of Pediatrics (AAP) and funded by independent grant from Pfizer. The Florida Chapter of the AAP will lead this quality improvement learning collaborative with 10-15 practices, aiming to improve immunization rates for children 19-35 months of age.

Due to the COVID-19 pandemic many children have fallen behind on receiving timely immunizations. We hope you will participate in this opportunity to increase immunization rates while earning MOC and CME credits. Project participants from previous CQN immunization collaboratives have found success in utilizing learned strategies to address the current situation of COVID-19. Below is a testimonial from a practice leader:

“During the current coronavirus pandemic, the need for maintaining routine childhood immunizations is even more critical. The last thing that we need is epidemic of vaccine preventable diseases on top of this pandemic. Using the immunization dashboards and population health approaches developed during the grant period, we were able to identify a decline in our immunization rates during the early phases of the pandemic, leading to the early planning of 'vaccine only' administration sites and a drive-through vaccination clinic.”

The “Core QI Team”
Participating practices will form a “core QI team” composed of:

1. A physician leader,
2. A nurse or medical assistant, and
3. A practice manager or office administrator

This team will lead the project in the practice and will be required to attend the learning sessions and calls listed below. They will also be expected to lead Plan-Do-Study-Act (PDSA) cycles in their practice. Practices are encouraged to enroll additional physicians and other team members in the project, but those team members are not required to attend learning sessions or calls. Participating practices are required to collect monthly practice-level data on the project measures, which are outlined on the next page.

Please refer to the ICHIP Project Incentives document (page 4) for a full list of participation requirements and criteria to receive MOC credit and performance improvement CME credit.

Meetings & Calls

<table>
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<tr>
<th>Through November 25</th>
<th>Practice enrollment into project &amp; QIDA</th>
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<tbody>
<tr>
<td>December 2020</td>
<td>Practice Onboarding Webinars hosted by National AAP Team</td>
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| December 1:         | This webinar will provide an orientation to the project including the data collection process. Two webinar times are offered. Participants only need to attend one webinar.
<p>| 11:00am-12:00pm CT/ | |
| 12:00pm-1:00pm ET   | |</p>
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<tr>
<th>Date</th>
<th>Event Description</th>
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| December 3: 5:00pm-6:00pm CT/6:00pm-7:00pm ET | Webinar Link: [https://aap.webex.com/meet/kmarcelle](https://aap.webex.com/meet/kmarcelle)  
  Phone Number: 844-621-3956  
  Access Code: 809 929 170 |
| January 14, 2021            | Baseline data due                                                                  |
| January 2021 Date & Time TBD | One-hour practice webinar #1 (hosted by the Florida Chapter)                        |
| February 2021 Date & Time TBD | Learning Session 1- Dates to be determined by chapter team  
  - In-person, all-day session hosted by chapter  
  Locations:  
  - Texas  
  - Florida |
| March 2021 Date & Time TBD  | One-hour practice webinar #2  
  - Practices will review data and share progress on PDSA cycles                       |
| April 2021 Date & Time TBD  | One-hour practice webinar #3  
  Practices will review data and share progress on PDSA cycles                             |
| May 2021 Date & Time TBD    | Learning Session 2  
  - 90-minute webinar                                                                   |
| June 2021 Date & Time TBD   | One-hour practice webinar #4  
  - Practices will review data and share progress on PDSA cycles                         |
| July 2021 Date & Time TBD   | One-hour practice webinar #5  
  - Practices will review data and share progress on PDSA cycles                         |
| August or September 2021 Date & time TBD | Learning Session 3- Dates to be determined by chapter team  
  - In-person, all-day session hosted by chapter  
  Locations:  
  - Texas  
  - Florida |
| August or September 2021 Date & time TBD | One-hour practice webinar #6  
  - Practices will review data and share progress on PDSA cycles                         |
| November 2021 Date & Time TBD | One-hour practice webinar #7  
  - Practices will review data and share progress on PDSA cycles                         |
| December 2021 Date & Time TBD | Learning Session 4 Celebration Webinar  
  - 90-minute webinar                                                                  |
Required Measures

Project data will be collected on a monthly basis for 12 data cycles (including one baseline data cycle). Data will be collected at the practice level and submitted through the AAP’s data collection tool, the Quality Improvement Data Aggregator (QIDA).

Project measures

- **Combination 3 Vaccination Measure:** All children 19-35 months old who are up to date on:
  - four diphtheria, tetanus and acellular pertussis (DTaP);
  - three polio (IPV);
  - one measles, mumps and rubella (MMR);
  - three H influenza type B (Hib);
  - three hepatitis B (HepB);
  - one chicken pox (VZV);
  - four pneumococcal conjugate (PCV).
- **DTaP Vaccination Rate:** All children 19-35 months old who are up to date on four diphtheria, tetanus and acellular pertussis (DTaP) vaccines
- **IPV Vaccination Rate:** All children 19-35 months old who are up to date on three polio (IPV) vaccines
- **MMR Vaccination Rate:** All children 19-35 months old who are up to date on one measles, mumps and rubella (MMR) vaccine
- **Hib Vaccination Rate:** All children 19-35 months old who are up to date on three H influenza type B (Hib) vaccines
- **HepB Vaccination Rate:** All children 19-35 months old who are up to date on three hepatitis B (HepB) vaccines
- **VZV Vaccination Rate:** All children 19-35 months old who are up to date on one chicken pox (VZV) vaccine
- **PCV Vaccination Rate:** All children 19-35 months old who are up to date on four pneumococcal conjugate (PCV) vaccines
- **Missed Opportunity Rate:** Children 19-35 months old who did not receive all eligible vaccines when they presented in the office

For the vaccination rate measures, practices will be asked to collect data on their practice patient population of 19-35-month-olds. For the missed opportunity measure, practices will be asked to collect data on a sample of 19-35-month-old patients who were seen for an office visit during the data collection month.

How to Enroll in the Project

To enroll in the project, **all participants** should complete the survey below:
https://www.surveymonkey.com/r/CqnICHIPenrollment

Any physician or practice staff member who will be participating in the project must complete the enrollment survey by **November 25, 2020.**
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Project Incentives & Requirements

Thank you for your interest in the ICHIP project. We want to ensure that you and your practice staff understand the various requirements and educational incentives that are available for participation in the project. CQN ICHIP will offer American Board of Pediatrics Maintenance of Certification (MOC) Part 2 and Part 4, as well as Performance Improvement Continuing Medical Education (PI CME) credits.

General Requirements for Participating Practices

1. Establish a core quality improvement (QI) team with at least three members, including:
   a. 1) a physician leader, 2) a nurse or medical assistant, and 3) a practice manager or administrator
   b. One member is asked to commit to be the day-to-day team contact.

2. All core QI team members and active participants must acknowledge participation requirements and incentives through an enrollment survey. All clinical and non-clinical practice staff (even if they are not active participants) should be aware of and support the project.

3. Complete the work outlined in the Practice Onboarding Packet.

4. Core QI team members should attend and participate in each of the four learning sessions (2 in-person, 2 webinar). Specifically, the physician leader must attend.

5. Core QI team members should attend chapter practice webinars (7 webinars) to review data and share best practices.

6. At a minimum, the core QI team must meet once a month to plan and revise tests of change.

7. All actively participating providers must participate in conducting tests of change.

8. All participating practices must collect and submit practice-level data monthly (for 12 months) to the Quality Improvement Data Aggregator (QIDA) data collection tool. Use of QIDA will require acceptance of a disclosure statement.

9. Participating practices must complete practice-level surveys to provide feedback, assess progress, and identify barriers.

10. The core QI team must share and review practice-level data with all project participants in the practice, as well as allow practice data to be shared across the CQN collaborative. Identifiable practice data cannot be shared outside of the collaborative without permission from the PI.

11. The chapter physician leader will attest that participating physicians have met meaningful participation requirements for ABP MOC Part 2 and Part 4 credit.

The requirements for each type of credit are outlined on the next page.
Maintenance of Certification Part 4 (50 points) (pending approval)
MOC Part 4 is awarded in two cycles for the project. Each cycle will award 25 points of MOC4 credit upon completion of the required elements.

- Cycle 1 will cover January 2021-June 2021, with credit awarded in June/July 2021.
- Cycle 2 will cover July 2021-December 2021 and credit will be awarded in December 2021/January 2022.

MOC Part 4 Criteria for the Physician (Cycle 1: January 2021-June 2021; 25 points):
- Meet once a month with practice project participants to review improvement data and plan tests of change
- Lead a Plan-Do-Study-Act (PDSA) ramp during at least one action period, and post PDSA worksheet to the project online repository.

MOC Part 4 Criteria for the Physician (Cycle 2: July 2021 - December 2021; 25 points):
- Meet once a month with practice project participants to review improvement data and plan tests of change
- Lead a Plan-Do-Study-Act (PDSA) ramp during at least one action period, and post PDSA worksheet to the project online repository.
- Test and implement communication strategies to address provider and patient vaccine hesitancy.

MOC Part 4 Criteria for the Practice (Cycles 1 and 2):
- Establish core quality improvement (QI) team (physician; nurse, nurse practitioner or medical assistant; and practice manager).
- Members of core QI team attend all learning sessions and disseminate learnings to other practice members.
- Members of core QI team attend seven practice webinars with their chapter and submit at least one Plan Do Study Act (PDSA) cycle to the project online repository per month.
- Collect and submit practice-level data on project measures for 12 monthly data cycles (baseline and 11 project data collection cycles).
- Complete practice-level surveys to provide project feedback and assess progress and identify barriers. Surveys must be completed within 21 days of distribution.

Maintenance of Certification Part 2 (pending approval)
MOC Part 2 will be awarded in December 2021/January 2022 at the conclusion of the project. There will be 20 points awarded for MOC Part 2. There is no partial credit for MOC Part 2 awarded.

MOC Part 2 Criteria for the Physician:
- Attend 2 of the following Learning Sessions:
  - Learning Session 1 (Full day, in person)
  - Learning Session 2 (1.5-hour webinar)
  - Learning Session 3 (Full day, in person)
- Complete an end-of-project evaluation survey within 21 days of survey distribution.
MOC Part 2 Criteria for the Practice:
  • Complete three practice-level surveys within 21 days of survey distribution.

Performance Improvement Continuing Medical Education Requirements (PI CME) (pending approval)
Physicians and other allied health professionals must meet the requirements below to receive up to 20 points of PI CME credit at the end of the project in December 2021/January 2022.

A PI CME activity is one during which evidence-based performance measures and QI interventions are used to help physicians identify patient care areas for improvement and change their performance. This type of CME activity differs in structure from other CME learning models that may also use QI data (e.g., live activities, enduring materials). All CME credit will be awarded as follows:

PI CME Criteria for the Physician and Allied Health Professional:
  • Learning Session 1 (in-person) – 5 points
  • Learning Session 2 (webinar) – 5 points
  • Learning Session 3 (in-person) – 5 points

Participants who attend all 3 learning sessions will be awarded an additional 5 points, for a total of 20 points. Partial credit for attending one or two of the above sessions will also be awarded.

Questions?
For questions regarding MOC and PI CME requirements, please contact:
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    Project Manager, Chapter Quality Network
    kmarcelle@aap.org
    630/626-6654