

CHILD HEALTH AND IMMUNIZATION 2007 ANNUAL REPORT

The Child Health and Immunization Program goal is to promote, protect, and preserve the health of the children in Kansas City. The services of the program benefit high risk children with limited resources and inadequate insurance. The services also promote Public Health through childhood immunizations to protect against the spread of communicable diseases. The program focuses on the areas of: Childhood, Adolescent and Adult/Travel Immunization Services, Immigration Physicals, Immunization (CASA) Audits, Case Management for Children With Special Health Care Needs (Hope Program), HPV Vaccine Initiative, Perinatal Hepatitis B Case Management, Building Blocks/Nurse Family Partnership, and Continuous Quality Improvement for Vaccine For Children (VFC) sites at private physician's offices.

These programs are part of an on-going emphasis by public health on the core functions of assessment, assurance, and policy development. These programs continue to promote public health through the emphasis on community health by preventing infectious diseases, and reducing the spread of infectious diseases.

1. Immunization Services

One of the major benchmarks of a community's health is the childhood immunization rate. The Public Health Service has set a goal of an age appropriate immunization rate for two year old children of 95% by the year 2010. Kansas City, Mo. had a childhood immunization rate of 91% in 2006, for births in 2004.

This reduction in the immunization rate for age appropriate two-year olds, from 83% to 78%, and then back up to 82%, and now to 91% resulted from the State of Missouri adopting the stricter criteria of 4:3:1:3:3:1 (4DTP:3POLIO:1MMR:3HIB:3HepB: and 1Varicella) instead of the previous criteria of 4:3:1 (4DTP:3Polio and 1MMR). The addition of 7 additional shots to the criteria for two year old children to be age appropriately immunized, made on time immunization more difficult, but has improved again.

The purpose of the immunization activities is to prevent communicable disease by assuring immunizations to citizens, circulating immunization reminders, collecting data on immunizations using MOHSAIC software, and sharing immunization information with schools. The program goal is in line with Healthy People 2010, to bring the current immunization rate for two year olds to the national and local goal of ninety-five percent. The public health nurse teams for childhood immunization, adult immunization and Hope case management home visitation continued to cross train to meet the increasing peak demand times for each program. The Immunization Team continued to offer the clinic at the Health Department, and at St. Vincent's. The Health Department Immunization Clinic is the only clinic in the city that has adopted CDC's "Best Practices" of: immunizations free of charge, a walk-in clinic with no appointment required, a reminder and recall system for parents, and special weekend events during peak times of the year.

The Immunization Team continued to work on the registry of childhood immunizations through CASA audits. In addition, the Immunization Team staff is working with private doctors' offices to educate their medical staff team regarding the importance of childhood immunizations, and to provide Total Quality Improvement including an immunization audit for their clinic and a follow-up to improve their childhood immunization rates.

With the goal of a 95% immunization rate and the rate for 2007 of 91% for the KCHD Clinic, there are currently estimated to be over 5,000 children, Kansas City, Mo. residents under the age of two years old, whose records show they are not properly immunized.

2. Immunization (CASA) Audits

The State of Missouri continued a multi-year project to increase the immunization database, and the Immunization Team expanded relationships with the Mid-America Immunization Coalition, private doctors' offices and Children's Mercy Hospital to continue a major data gathering and education project to establish an on-going data gathering system for MOHSAIC, the Missouri Department of Health and Senior Services (DHSS) system for immunization records. These projects continue to move us toward the goal of 95% of two year old children being age appropriately immunized by the year 2010.

3. Adult/Travel Immunizations

The Adult/Travel Immunizations' clinic provides immunizations to adults 19 years of age and older who are traveling to different countries and/or need their immunizations updated. All the vaccines whether for Adult or Travel are given according to the Centers of Disease Control and Prevention (CDC) established requirements.

4. Adolescent Immunization Education Project

Adolescent Immunization Education is a continuation of a program which works to increase education to primary care physicians by providing education to physician's staff, regarding vaccine storage and handling, publicity regarding new adolescent immunizations, and the development in cooperation with private insurers of the Adolescent Immunization Collaborative. The National Immunization Conference was held in Kansas City in March of 2007, and the Adolescent Immunization Collaboration sponsored a Learning Exchange by Dr. Tamera Coyne-Beasley, M.D. The Adolescent Immunization Collaborative brought together health plans, state and local health departments, school districts, Safety net providers, and community organizations which focused on regional roll-out assistance for a bi-state immunization registry, physician consensus immunization guidelines, provider feedback reporting, school-based interventions, and well-child exam support.

With the support of several health care plans, the Adolescent Immunization Collaborative had many successes:

1. 100% of the 1,500 primary care physicians received consensus guidelines.
2. An additional 1,500 specialists and nurse practitioners received the guidelines.
3. 90% of the 198 middle/high schools received a "Give It a Shot" toolkit distributed to the schools in the five county metro area.

4. 53% (106 of an estimated 198) of the region's middle/high school nurses attended the toolkit training workshop with author Linda Boyer-Chu, or received training at school nurse meetings or individually from collaborative members.
5. 35,000 students and parents have been exposed to the "Give It a Shot" toolkit components for the 21,000 middle school students in the five-county region.
6. 68% (135 of 198) of middle/high schools received the "Immunization Resource Guide for Secondary School Nurses".
7. 22% (6 of 27) of area school superintendents received "resource Guides" and education to promote awareness.
8. An estimated 20,000 parents and students viewed "Back to School" posters at retail shops.
9. 135 immunizations were administered at 6 school based clinics in July 2007.
10. Collaborative member's satisfaction and feedback ratings were high, at 95% or above.

5. HPV Initiative

The Human Papillomavirus (HPV) Initiative is a program funded by the Health Care Foundation of Greater Kansas City and the Reach Foundation through a grant totaling \$2.5 million. The grant covers the expense of vaccine and administration costs for 5,000 girls and women in the Greater Kansas City area to receive the three-dose HPV vaccine, Gardasil. The Kansas City Health Department (KCHD) was selected as one of two coordinating agencies for this program, handling the coordination of the grant for 23 of the 33 vaccine distribution sites selected to participate. As a coordinating agency for this grant, funding was provided for one Program Coordinator who facilitates the process of ordering vaccine and requesting administrative fees for all 23 sites, including the KCHD. The Program Coordinator also trained personnel at all sites on patient screening for grant eligibility and administers the vaccine to eligible adult females at the KCHD in the Immunizations Clinic or through outreach to local community colleges and universities. The vaccine program rolled out in October of 2007.

A total of 497 HPV vaccinations were administered in 2007 among the 23 sites under the KCHD coordination for the HPV Initiative, with 56 of those vaccines having been at the KCHD.

6. Immigration Physicals

The Immigration Physical is required for individuals applying for citizenship, seeking Permanent Residency, or a green card. The Immigration Physical must be conducted by a Civil Surgeon, and be completed prior to approval of their application. The purpose of the medical exam is to identify applicants with inadmissible health-related conditions for the Department of State (DOS) and the U.S. Citizenship and Immigration Services (USCIS). The KCHD has also been approved as an official site on the USCIS web page.

The health-related grounds for inadmissibility include persons who have a communicable disease of public health significance, who fail to present documentation of having received vaccination against vaccine preventable diseases, or who have or have had a physical or mental disorder with associated harmful behavior, or who are a drug abuser or addict.

Immigration Physicals during 2007: 66

7. Building Blocks/Nurse Family Partnership

The Missouri Department of Health and Senior Services (DHSS) awarded a grant to the KCHD for the implementation of a nurse home visitation program for first-time low income moms, Building Blocks/Nurse Family Partnership. The Nurse Family Partnership has scientifically demonstrated outcomes through randomized controlled trials, and even fewer have demonstrated multi-generational outcomes that benefit society economically and reduce long-term expenditures. The program's goals are to improve pregnancy outcomes, improve child health and development, and improve the economic self-sufficiency of the family. The funding for four full time registered nurses and a one-half time Nurse Supervisor allow for a caseload of a maximum of 100 first-time low-income moms.

8. Hope Program

Case Management for Children With Special Health Care Needs –Hope Program, is a program funded by the State of Missouri DHSS, Bureau of Special Health Care Needs (BSHCN). Through registered Public Health Nurses, and Public Health Specialists, this program provides case management and a wide variety of services including in-patient hospitalization, medications, therapy, specialized equipment, and related medical services up to \$25,000 per child per year. The child must have a qualifying medical condition, and the family must meet income guidelines. The Hope Program is for children with a serious or chronic medical condition in order to develop, promote, and support community-based systems that enable the best possible health and highest level of functioning for children with special health care needs.

Over 150 children and their families in a multi-county area are enrolled in the Hope Program and receive case management services.

The services available depend on the condition or illness being treated such as:

- a. Diagnostic services to include outpatient tests and evaluations and up to five days of inpatient diagnostic evaluation for some conditions.
- b. Treatment services to include inpatient care, surgery, therapy, physician office visits, prescription medicines, durable medical equipment and service coordination.
- c. Service Coordination, Case Management, includes help to determine what the child's needs are and the best way to get the help the family needs.

The Child Health and Immunization Program strives to align its activities with the essential public health services listed below.

1. Monitor health status to identify community problems.

The Child Health Program staff developed a community leadership approach to service delivery as they gathered extensive data and conducted educational opportunities through an immunization curriculum presented to physician offices. This community wide effort will assist to strengthen the community health system and enable the program to reach the goal of appropriately immunizing 95 percent of two year olds by the year of 2010.

Key walk-in immunization indicators of the number of clients immunized and the number of immunizations given had a decreasing trend over the last few years, but an increase in 2001, followed by a decline in 2002, and an increase again for 2003, and 2004:

Year	# clients immunized	# immunizations given
1999	7,455	14,827
2000	6,385	11,930
2001	9,985	18,120
2002	8,184	15,983
2003	8,530	17,195
2004	9,441	25,936
2005	9,321	20,863
2006	8,663	21,708
2007	8,548	22,515

1. A. Adult Flu Shots

The Communicable Disease Prevention and Public Health Preparedness Division, in cooperation with the Public Health Preparedness staff, conducted several off-site community clinics. This enabled the Health Department to accomplish two related tasks. One was to distribute the Flu Vaccine to high risk adults in a community setting, and the other was to practice the organization, and process that would be necessary in the event of a public health emergency need for large volume inoculations.

A total of 3,186 Adult Flu Shots were administered in 2007.

2. Assure a competent public health and personal health care work force.

Cross-training allows the nursing staff to respond to multiple assignment peak demands, as well as public health emergencies, as we prepare for bioterrorism threats. This cross training continued as the nurses became trained in Child Health and Immunizations.

The Child Health and Immunization Program provided field experience for nursing students. The staff routinely educates nurses of the importance of public health in order to prevent infectious diseases, and to reduce the spread of infectious diseases. The staff utilizes the city's computer classes, Mid-America Regional Council courses, and attends conferences and teleconferences to further their continuing education.

Trainings included:

- a. National Incident Management System Emergency Management Institute: IS-00-200
IS-00-100, IS-00-700
- b. Mid America Immunization Coalition: Immunizations-A Never Ending Story
- c. Red Cross First Aid: CPR/AED
- d. CDC: Immunizations Update
- e. Infection Control: Blood Borne Pathogens
- f. Excel Level 1
- g. KCHD: Basics of Epidemiology School Nurse Contract- DHSS
- h. STD Intensive –STD/HIV Prevention Training Center
- i. CDC: Epidemiology and Prevention of Vaccine Preventable Diseases
- j. KCHD: Cultural Competence
- k. DHSS: Maternal and Child Health Institute
- l. CDC: Current Issues in Immunization
- j. CDC: Current Issues in Immunization-Hep B
- k. Epidemiology & Prevention of Vaccine Preventable Diseases-Principles of
Vaccination
- l. The Six Risk Behaviors of Adolescents Workshop
- m. Epidemiology & Prevention of Vaccine Preventable Diseases
- n. Weapons of Mass Destruction Standardized Awareness Training
- o. HPV Vaccine
- p. Adolescent Immunization/A New Era in Disease Prevention
- q. WIC Orientation
- r. Customer Service training

- s. DHSS Children with Special Health Care Needs Training
- t. Bridging the gap, cultural, medical interpreter training

3. Inform, educate and empower people about health issues.

The Child Health and Immunization staff presents an Immunization Curriculum to private physicians to enable them to incorporate “Best Practices” into their clinics in order to improve immunization rates. The campaign “BEE WISE, IMMUNIZE ON TIME “educates parents to immunize the children before the start of school since children are not allowed entry into school under state law until they are properly immunized. The media campaign saves dollars by linking the “ON Time” campaign with the national, state and local campaign to “BEE WISE, IMMUNIZE”. The Child Health and Immunization Program developed magnets with the theme, and with the immunization schedule, to be distributed free at health fairs, the Medical Records Office, Vital Statistics Office, WIC clinics, Immunization Clinic and at other community events. This reminder, in addition to the reminder postcard and the recall telephone call, educates and empower parents to bring their children in for timely immunizations.

4. Mobilize community partnerships to identify and solve health problems.

The Child Health and Immunization Program collaborated with several groups to assist in identifying and recommending policy development to solve health problems.

Those groups include the Maternal Child Health Coalition (MCH) which consists of community organizations dedicated to improving the health of women, children, and youth, and the Mid-America Immunization Coalition(MAIC) which is dedicated to improving immunizations for children and adults.

The Adolescent Immunization Collaboration was formed to increase the immunization rates for adolescent in the Kansas City Metropolitan Area. Three Work Groups were formed: School Nurse Work Group, Bi-State Registry Work Group, and the Provider Work Group.

5. Develop policies and plans that support individual and community health efforts.

The Child Health and Immunization Program actively worked with the MCH Coalition and the MAIC to develop recommendations to improve public health. The MCH Coalition and MAIC routinely educate city council members and state legislators on current issues pertaining to child health issues.

The Adolescent Immunization Collaboration (AIC), consisting of representatives from Kansas Department of Health and Environment(KDHE), Missouri Department of Health and Human Services (DHSS), health care plans, county health departments, school nurses, and other medical professionals was formed to improve adolescent immunization rates. Three Work Groups were formed.

6. Link people to needed personal health services and assure the provision of health care when otherwise unavailable.

The Child Health and Immunization Program routinely assists clients with referrals to WIC, First Steps, MC+, United Way services, and other agencies as needed. Clients that are out of our jurisdiction are referred to other county and state health departments. Linking our clients with community agencies to help meet their basic needs increases their availability to our more specialized services.

7. Evaluate the effectiveness, the accessibility, and the quality of personal and population-based health services.

The Hope Program provides customer satisfaction surveys to clients of Case Management. The Public Health effectiveness of the Immunization Clinic is evaluated by the immunization rate. The CASA Audits for private physicians gives feedback to the private clinics regarding the effectiveness of their immunization practices through the CASA Audit rate. The CASA Rate, rate of age-appropriate immunizations, for the KCHD Clinic was 91%, for children born in 2004. The Vaccine for Children Program (VFC) evaluates the safety of the vaccine and monitors compliance of the private doctors with VFC guidelines. The public health of the community is monitored by the reporting of a wide variety of preventable communicable diseases

8. Research for new insights and innovative solutions to health problems.

The Mid – America Immunization Coalition supported an immunization study conducted by UMKC School of Nursing, funded by CDC. The VFC –AFIX program is being evaluated by CDC to determine if it is an effective nationwide method to improve immunization rates. The State of Missouri has changed its method of determining immunization rates and moved to a more strict compliance measure following the recommendation of CDC. The immunization clinic is intensifying it's use of CDC's "Best Practices" in order to continue to increase the immunization rate once again to meet the more stringent criteria recently adopted by the state of Missouri.