

**Sample Immunization Program Evaluation Plan**  
**June 2008**

Grantee: \_\_\_\_\_  
This form completed by: \_\_\_\_\_ Title: \_\_\_\_\_  
Evaluation Lead Name: \_\_\_\_\_ Title: \_\_\_\_\_  
Evaluation Lead Phone #: \_\_\_\_\_  
Evaluation Lead Email: \_\_\_\_\_  
Projected start date for implementing this evaluation plan: \_\_\_\_\_  
Projected end date for this evaluation: \_\_\_\_\_

**A. Program Component(s) - Specify the component you will be evaluating.**

Adolescent vaccination       Population Assessment  
 Adult vaccination             AFIX (Provider Quality Assurance)  
 Education/training             Surveillance  
 IIS                                     Vaccine management and accountability  
 Perinatal hepatitis B         Women Infants and Children Program  
  
 Other      If checked, please specify: \_\_\_\_\_

**B. Please BRIEFLY list which activity or activities within the above component you plan on evaluating.**

The feedback sessions of AFIX visits. (*see Page 10, AFIX standards*)

**C. Evaluation Goal(s) - State the goal(s) related to the component/activity you have chosen. Refer to Chapter 2, Page 11 of the Guide to Immunization Program Evaluation for help with this section.**

To improve the quality and effectiveness of AFIX feedback sessions.

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**D. Stakeholders - Fill out the table below. Note: This table is a combination of Tables 1 and 2 in the Guide; therefore, it should include members of the evaluation team. Refer to Chapter 1, Pages 7-10 and Chapter 2, Page 12 of the Guide to Immunization Program Evaluation for help with this section.**

<b>Tables 1 and 2: Stakeholder Assessment and Engagement</b>				
<b>Group Name OR Person's Name and job title</b>	<b>Interests in or perspectives about the evaluation</b>	<b>Roles in the evaluation</b>	<b>Responsibilities in the evaluation</b>	<b>How and when to engage</b>
Program Manager	Ensure adequate stakeholder input; Complete evaluation plan on time; Ensure results of evaluation are useful and utilized to improve program performance	Evaluation team leader	Oversee data collection and analysis; Write evaluation plan; Utilize evaluation findings	Involved in all activities throughout the evaluation
AFIX Coordinator	Evaluation and its findings could impact routine activities; Interested in providing useful feedback for providers	Stakeholder liaison; Data collection and analysis	Coordinate stakeholder meetings; Provide input on evaluation design, methods, and interpretation and use of findings; Share findings with stakeholders; Utilize evaluation findings	Meet regularly with PM to develop methods; Attend all SH meetings
AFIX field staff	Evaluation and its findings will directly impact day-to-day activities; Interested in providing useful feedback for providers	Provider liaisons; Data collection	Provide input on data collection methods; Data source and data collectors; Share findings with providers; Utilize evaluation findings	Meet regularly with AFIX Coordinator; Attend initial SH meeting and subsequent ones as needed
Provider office staff (clinical and admin.)	Interested in receiving constructive feedback on ways to improve immunization delivery and providers; Interested in minimizing AFIX-related burden on staff time	Represent providers' perspectives on AFIX Feedback;	Provide feedback during evaluation planning; Data source; Utilize evaluation findings	Invite to initial stakeholder meeting; Phone/Email communication during data collection phase; As needed, invite to other SH meetings to troubleshoot, share findings, etc.

**E. Describing the program component/activity. Briefly describe the following aspects of the component/activity you are evaluating. Note: Please provide a more detailed description if the activity you are evaluating is new or not well established (e.g. activities related to adolescent vaccinations). Refer to Chapter 2, Pages 13-14 of the Guide to Immunization Program Evaluation for help with this section.**

**Background:**

- Program has 5 AFIX staff
- Staff get some instructions on AFIX feedback sessions at the time they are hired
- None have received standardized training on AFIX Feedback standards
- Currently, program does not track how many feedback sessions include use of written quality improvement (QI) plans (as described in the AFIX standards, Feedback, Level I – pg 10)
- Additionally, we do not know if QI plans contain the minimum requirements
- Although AFIX staff work with providers to agree upon opportunities for improvement, we do not track in a standardized manner whether providers are implementing the agreed upon changes.

**Context:**

- Feedback sessions are the only opportunity to interact directly with provider staff (especially decision-makers)
- Feedback visits are often combined with VFC visits and therefore, some of the items discussed for the AFIX portion might not get adequate time and attention
- Want to use the visit to help providers improve immunization delivery and increase their immunization rates

**Stage of Development:**

We have been implementing AFIX visits (including Feedback sessions) for the past 8 years. The process is very well-established.

**Target population:**

- Clinical and administrative staff in private and public immunization provider offices
- AFIX staff

**Objectives:**

- By March 2009, 100% of AFIX field staff in the state will receive training on how to conduct feedback sessions that meet all AFIX Level I standards.
- By June 2009, all AFIX field staff will report an increase in knowledge about the components of a feedback session including which key items should be included in a quality improvement (QI) plan.
- Between July and December 2009, during AFIX Feedback sessions, all AFIX field staff will develop QI plans that contain all key items.
- Starting in January 2010, all AFIX field staff will follow up with providers at least on a biannual basis to document their progress in implementing the improvement opportunities that were agreed upon at their last feedback session.

- Starting in January 2010, all providers will implement by the proposed date at least 50% of the improvement opportunities that were agreed upon at their last feedback session.

**F. Fill out the table below. You may choose to describe the entire component or the specific activity or activities within the component that you are evaluating. Note: This table should represent the current status of the component or activity NOT where you would like to be in the future. Refer to Chapter 2, Pages 15-17 of the Guide to Immunization Program Evaluation for help with this section.**

<b>Table 3: Program Component/Activity Description</b>					
<b>Inputs</b>	<b>Activities</b>		<b>Outputs</b>	<b>Outcomes</b>	
	<b>Initial</b>	<b>Subsequent</b>		<b>Short-/Mid-term</b>	<b>Long-term</b>
Funding	Develop AFIX protocol	Review provider records & assess coverage level	Protocols	Increased provider knowledge	Decrease in missed opportunities
Staff			Trained staff		Decrease in invalid doses
Time	Train AFIX staff	Provide feedback & recommend strategies for improvement	Providers visited	Increased provider motivation	Increase in timely vaccine receipt for eligible population
CoCASA	Set up provider visits	Acknowledge and reward improved performance	Coverage assessment	Change in office practices and policies	Increased immunization coverage
		Document outcome of visit in database (CoCASA)	Feedback provided	Change in physician behavior	Decreased VPD
		Promote information exchange	Rewards provided		
			Data in database		
			Information exchanged		

**G. Optional – If you have created a logic model in addition to Table 3, please submit your logic model as an attachment (instructions will be provided in PAPA). Refer to Chapter 2, Page 17 of the Guide to Immunization Program Evaluation for help with this section.**

**H. Focusing the evaluation and Data Collection and Analysis - Fill out the table below. Note: The number of questions and indicators per question can vary. For each indicator, you need to develop a target and BRIEFLY list/describe the data sources and the method, timeline and person responsible for data collection and analysis. Refer to Chapter 2, Pages 18-29 of the Guide to Immunization Program Evaluation for help with this section.**

<b>Table 8: Data Collection and Analysis</b>				
<b>INDICATOR(S)</b>	<b>TARGET(S)</b>	<b>DATA SOURCE(S)</b>	<b>DATA COLLECTION</b>	<b>ANALYSIS</b>
<b>Evaluation Question #1: How many providers receive a quality improvement (QI) plan containing the 4 key items* (Level 1, AFIX Feedback Standards)?</b>				
1. Percent of providers that received a QI plan following an AFIX visit	1. 80% of providers received a QI plan following an AFIX visit	1. AFIX field staff; site visit notes	1. <b>Method:</b> Review site visit notes from 2007-2008; if not available or incomplete, survey AFIX field staff <b>Timeline:</b> Dec 2008-Jan 2009 <b>Person Responsible:</b> AFIX coordinator and AFIX field staff	1. <b>Method:</b> Frequencies <b>Timeline:</b> Dec 2008-Jan 2009 <b>Person Responsible:</b> AFIX coordinator and AFIX field staff
2. Percent of QI plans that include all four key items	2. 100% of QI plans contain all four key items	2. QI Plans	2. <b>Method:</b> Review a sample of QI plans from 2007-2008 developed by each AFIX field staff <b>Timeline:</b> Dec 2008-Jan 2009 <b>Person Responsible:</b> AFIX coordinator	2. <b>Method:</b> Frequencies <b>Timeline:</b> Dec 2008-Jan 2009 <b>Person Responsible:</b> AFIX coordinator
<b>Evaluation Question #2: Do AFIX staff know how to write a QI plan (including 4 key items)?</b>				
1. Percent of AFIX field staff trained on how to write a QI plan (including all four key items)	1. 100% of AFIX field staff received training on QI plans before conducting AFIX visits	1. Staff training records	1. <b>Method:</b> Review staff training records <b>Timeline:</b> Dec 2008 <b>Person Responsible:</b> AFIX coordinator	1. <b>Method:</b> Frequencies <b>Timeline:</b> Dec 2008 <b>Person Responsible:</b> AFIX coordinator

<b>Table 8: Data Collection and Analysis</b>				
<b>INDICATOR(S)</b>	<b>TARGET(S)</b>	<b>DATA SOURCE(S)</b>	<b>DATA COLLECTION</b>	<b>ANALYSIS</b>
2. Percent of AFIX field staff who feel confident in their ability to write a QI plan	2. 100% of AFIX field staff feel confident in their ability to write a QI plan	2. AFIX field staff	2. <b>Method:</b> Survey AFIX field staff about barriers and facilitators of QI plan development <b>Timeline:</b> Dec 2008-Jan 2009 <b>Person Responsible:</b> AFIX coordinator	2. <b>Method:</b> Frequencies; Qualitative content <b>Timeline:</b> Jan 2009 <b>Person Responsible:</b> AFIX coordinator
<b>Evaluation Question #3: How many providers implement the interventions (AKA “recommendations”) that were agreed upon during their AFIX Feedback visit?</b>				
1. Percent of providers that implemented one or more recommendations (by the proposed date)	1. Providers implemented at least 50% of recommendations (by the proposed date)	1. Providers; AFIX field staff; Site visit notes and QI plans from 2007-2008	1. <b>Method:</b> Survey (a sample of) providers who received visits during 2007-2008 to identify which recommendations were implemented; survey (a sample of) providers and all AFIX field staff about barriers and facilitators of implementation of recommendations; Review site visit notes and QI plans from 2007-2008 <b>Timeline:</b> Dec 2008-Feb 2009 <b>Person Responsible:</b> AFIX coordinator and AFIX field staff	1. <b>Method:</b> Frequencies; Qualitative content <b>Timeline:</b> Feb 2009 <b>Person Responsible:</b> AFIX coordinator and AFIX field staff
2. Percent of feedback visits that were conducted with provider staff who have the authority to implement changes	2. 100% of AFIX feedback sessions are conducted with provider staff who have the authority to implement changes	2. Site visit notes from 2007-2008	2. <b>Method:</b> Review site visit notes and QI plans from 2007-2008 <b>Timeline:</b> Dec 2008-Jan 2009 <b>Person Responsible:</b> AFIX field staff	2. <b>Method:</b> Frequencies <b>Timeline:</b> Jan 2009 <b>Person Responsible:</b> AFIX field staff

\*The four key items in a QI plan include: 1. Opportunity for improvement on which to focus. 2. Define action steps for implementing the intervention. 3. Responsible party for implementation. 4. Date to implement intervention. (AFIX Standards, page 10)

**I. Ensuring use and sharing lessons learned - Fill out the table below. Note: We understand that this portion of your evaluation will occur in the distant future but please provide your best estimate. Refer to Chapter 2, Page 30-31 of the Guide to Immunization Program Evaluation for help with this section.**

<b>Table 9: Disseminating Findings</b>				
<b>TARGET PERSON OR GROUP'S NAME</b>	<b>TARGET'S EVALUATION USE(S)</b>	<b>DISSEMINATION ITEMS AND METHODS</b>	<b>TIMELINE FOR DISSEMINATION</b>	<b>PERSON RESPONSIBLE</b>
Program manager	Determine the current status of AFIX Feedback sessions; Utilize findings to improve training provided to field staff and maximize Feedback sessions to ensure more providers are implementing agreed upon recommendations	Provide a complete report of findings (electronic and hardcopy)	At the completion of the evaluation (~ March 2009)	AFIX Coordinator
AFIX field staff	Identify areas of improvement for AFIX Feedback sessions; Adjust methodology for recommendations made during feedback sessions.	Present a summary of evaluation findings during monthly staff meetings	At the completion of the evaluation (~ March 2009)	AFIX Coordinator
Immunization providers (All AFIX providers including data sources)	Improve implementation of agreed upon interventions; Use as benchmark to see how they are performing compared to other providers with regard to implementing recommendations	Provide a summary of relevant findings (electronic and hardcopy)	At the completion of the evaluation (~ March 2009)	AFIX Field staff
NIC 2009 Conference	Learn about methodology for evaluating AFIX Feedback visits	Presentation	February 2009	Program Manager

## **END EVALUATION PLAN**

This document can be found on the CDC website at:

<http://www.cdc.gov/vaccines/programs/progeval/downloads/eval-afix-examples-2008.pdf>