

Texas Vaccines for Children 2007

Instructions for Completing the Immunization Record Review Tool (IRRT)

INTRODUCTION

The Immunization Record Review Tool (IRRT) is a medical record review tool used to assess medical record documentation, as it relates to the clinic's immunization program. To complete the IRRT, you will generally select ten records to review. Each of these records is evaluated according to nine quality assurance questions (indicators), and a final "% compliance" is tabulated for that indicator. These results are used to answer corresponding items on the Site Survey tab.

OVERVIEW OF IRRT INDICATORS

The nine indicators are:

- 1. Vaccinations given in accordance with the ACIP/AAP/AAFP harmonized vaccine schedule.**
Is the provider giving vaccinations appropriate for the child according to the recommended schedule?
- 2. All indicated vaccine doses are simultaneously administered.**
Is the provider giving all of the recommended vaccines the child is due at each visit (vs. multiple visits)?
- 3. Complete histories are recorded on the immunization record.**
Is the clinic correctly documenting or obtaining documentation for past vaccinations given at other locations?
- 4. Complete recording procedures – vaccine manufacturer and lot number are recorded for each vaccination.**
For each vaccine administered at this clinic, are the vaccine manufacturer and lot number documented correctly?
- 5. Complete recording procedures – nurse's signature, title and date of vaccination given are recorded at each visit.**
For each vaccine administered at this clinic, are the administering nurse's signature, title and date correctly documented?
- 6. Complete recording procedures – clinic name and address are stamped or written on each immunization chart.**
Are the clinic's name and complete address printed or written on all forms documenting vaccines given at this clinic?
- 7. Complete recording procedures – the date from the VIS is recorded for each vaccination given.**
For each vaccine administered at this clinic, is the publication date of the VIS(s) documented?
- 8. Documentation of eligibility screening is noted in the record.**
Is the screening for the client's TVFC eligibility status documented and easily retrievable?
- 9. The category of eligibility is:**
What TVFC eligible (or non-eligible) category is the client in?

SELECTING MEDICAL RECORDS FOR THE IRRT

To complete the IRRT, you will need ten medical records, preferably of TVFC eligible children. If there are less than ten TVFC clients in the clinic, use as many eligible records as are available and then supplement that number with records of non-eligible clients. If there are not enough records of children in the CoCASA age range, you may use records of children up to 19 years of age. The best way to select appropriate records for the IRRT is to set aside 10-15 potential IRRT records as you complete the CoCASA review.

In general, a good set of medical records should contain:

- Records with a mix of eligibility categories, so you can assess for documentation of eligibility for different categories of children.
- Records with documentation from at least 1-2 immunization visits at this clinic, so you can review immunization-related documentation from this particular clinic.

OPENING AND VIEWING THE IRRT:

From your desktop on the laptop computer, double click on the “DSHS Immunization QA On-Site Evaluation Report” icon to open the DSHS Immunization QA On-Site Evaluation Report. When you get the message regarding the macros, click on the “Enable Macros” button.

The third tab on the bottom of the screen is labeled IRRT. Click on this tab to open the IRRT screen. If you’ve already entered the header information (PIN number, clinic name, your name, and review date) in the Header tab these items will already be electronically filled in on the IRRT. If not, you can leave these areas blank until you fill them in on the Header tab.

ENTERING INFORMATION INTO THE IRRT

Each column with a number header (1, 2,...) represents a medical record. There are ten columns for ten medical records. These columns should all be filled in, unless this clinic does not have ten records for ten children. Each row is a question (indicator). There are nine indicators, each of which has a descriptive phrase to prompt you. For each medical record you review, answer each indicator by moving down the rows in that column. If you don’t have enough information in a medical record to answer all the indicators, consider selecting another record.

Indicators #1 – 8: You will mark these indicators with a “y” for a yes response or an “n” for no response. The program will automatically calculate the percent of “y” answers for that indicator in the ‘Rate’ column.

Indicator #9: You will answer this indicator by selecting the TVFC-eligible (or non-eligible) category instead of a “y” or “n”. Therefore, you will NOT use the ‘Rate’ column.

IRRT RESULTS

The results (%) for each indicator (‘Rate’ column) are used to answer specific items on the Site Survey. These results will be automatically linked to the appropriate items on the Site Survey, so you will not need to transcribe them.

Use the results to answer the items on the Site Survey “y” or “n” and then select any corrective actions or comments in the ‘Corrective Action’ or ‘Comments’ area, or type in corrective actions or comments in the ‘Other Comments’ area for the appropriate item. For example, if you notice a provider has a low % result on indicator #6 (documenting clinic name/address on immunization forms) because there is no space on the form for a heading, suggest using another standard form that includes space for a clinic name/address stamp. As you complete this review, hold out any records that indicate a problem and/or have some discrepancy for discussion with clinic staff.

COMPLETING INDIVIDUAL INDICATORS

- **#1 Vaccinations are given in accordance with the ACIP/AAP/AAFP harmonized vaccine schedule (site survey item #40).**

The intent of this item is to get a sense of the clinic’s immunization rate, especially if the clinic does not see children in the 19-35 month age range.

If you performed a CoCASA at this clinic, you can access the immunization record for any specific patient and determine the on-time vaccinations provided to this individual. All of the vaccinations that are appropriate for this child must be given on schedule (right age and correct interval) to count this record as a “y” for yes.

If the clinic does not see children until they are three years of age or older, or you did not conduct a CoCASA review, use the Recommended Childhood and Adolescent Immunization Schedule Table (below) to identify the vaccinations that the patient should have received by their current age. Compare the vaccinations recommended to be given to the vaccinations actually received, as documented in the client’s record. All the appropriate vaccinations for the child’s age should be documented as given to count any record as “y” for yes. Use this information to answer #40 on the Site Survey. The % results will automatically appear but you will have to insert the # of records reviewed in the item. If the % results is < 60%, then answer the site survey item “n” and select the appropriate ‘corrective actions/comments’, or type in the ‘Other Comments’ area..

Recommended Childhood and Adolescent Immunization Schedule Table

Use this table to quickly check the number of immunizations a child should have at approximately what age. This does not include recommended immunizations for high risk groups.

Age→ Vaccine ↓	12 mo	15 mo	18 mo	24 mo	4-6 yr	11-12 yr	13-18 yr
Hepatitis B	3	3	3	3	3	3	3
DTaP/ DTP	3	4	4	4	5	5 + Tdap	5 + Tdap
Hib	3	3	3	3	3	3	3
IPV	3	3	3	3	4	4	4
MMR	1	1	1	1	2	2	2
PCV	4	4	4	4	4	4	4 + PPV high risk
Varicella	1	1	1	1	2	2	2
Hep A	1	1	2	2	2	2	2
Tdap	0	0	0	0	0	1	1
MCV4	0	0	0	0	0	1	1
Rotavirus	3	3	3	3	3	3	3
HPV*	0	0	0	0	0	3	3
TOTAL VACCINES NEEDED	22	23	24	24	27	33	33-34

*HPV should not be reviewed until official direction from DSHS is given in early 2007

- **#2 All indicated vaccine doses are simultaneously administered (site survey item #29).**

Review dates of vaccine administration performed at this clinic only to see if all the vaccines that are due are given on the same visit (desirable) or if they are given at several visits within a short period of time (undesirable). Use this information to answer item #29 on the Site Survey. The % results **and # of records reviewed** will automatically appear in the item. If the % results is < 60%, then answer the item "n" and select the appropriate 'corrective actions/comments', or type in the 'Other Comments' area.

- **#3 Complete histories are recorded on the immunization record (site survey item #33a).**

Immunization histories should reflect vaccinations given prior to the patient becoming an active client at this clinic. The history must contain the complete date (month, day, and year) and the name of the clinic or provider where the vaccinations were given. If the child's immunization record indicates that the first dose of hepatitis B was given "at birth" or "in hospital," look for the hospital record to see if a specific date is recorded there. If the specific date is missing for any vaccination that is indicated as given elsewhere, mark this record as "n" for no. Use information from this question to answer item #33a on the Site Survey. **The % results and # of records reviewed** will automatically appear in the item. If the % results is < 60%, then answer the site survey item "n" and select the appropriate 'corrective actions/comments', or type in the 'Other Comments' area.

- **#4 Complete recording procedures: vaccine manufacturer and lot number are recorded for each vaccination (site survey item #32).**

Providers are expected to use accurate and complete recording procedures for the vaccinations that they provide. This includes:

vaccine given

date vaccine administered ("birth" or "at hospital" is not an acceptable date designation)

vaccine manufacturer

vaccine lot number

signature and title of person administering the vaccine (initials are not acceptable)

organization and address of clinic location

the date from the VIS provided

vaccine refusal should also be documented

Note: Parent's signature required by Texas Family Code Chapter 32 Subchapter B. This is an educational piece and will not be documented on the IRRT.

The following items are not required but are recommended:

site and route of administration

The documentation of manufacturer and lot number are crucial if an adverse reaction should occur or if any question arises concerning the efficacy of the vaccine.

To accurately assess documentation of the vaccine manufacturer and lot number, focus solely on the vaccines that were given at this clinic. It is acceptable not to have documentation of the vaccine manufacturer and lot number for vaccines given elsewhere.

The clinic staff may write these items on the immunization record or place the sticker from the vial of a single-dose vaccine on the patient's immunization record to document the vaccine manufacturer and lot number, as long as these items are legible. It is also acceptable for the clinic to keep a log to document the vaccine manufacturer and lot number and not document this information in the patient's record, if the specific patient information can be tracked in the log.

If either of these items is missing on any vaccines provided at this clinic, mark the record as "n" for no. The results **and the # of records reviewed** of indicators #4, #5, #6, and #7 all feed into the answer for item #32 on the Site Survey. If ANY one of these results is < 60%, you will mark #32 as "n" for no and select the appropriate 'corrective actions/comments', or type in the 'Other Comments' area.

- **#5 Complete recording procedures: nurse's signature, title, and date of vaccination are recorded at each visit (site survey item #32).**

To accurately assess documentation of the nurse's signature, title and date, focus solely on the vaccines that were given at this clinic. These items should be recorded at each immunization visit. The nurses' initials for each vaccine are not acceptable unless there is another place on the page or in a separate log where the nurses can write both their initials and their signature (see the immunization record from the American Academy of Pediatrics). If any of these items are missing, mark the record as "n" for no. The % results **and the # of records reviewed** will automatically appear in the site survey item. If the % results is < 60%, then answer the site survey item "n" and select the appropriate 'corrective actions/comments', or type in the 'Other Comments' area.

- **#6 Complete recording procedures: clinic name and address are stamped or written on each immunization chart (site survey item #32).**

To accurately assess documentation of the clinic name and address, focus solely on the vaccinations that were given at this clinic. The address should be a complete physical (street) address. While the clinic should document the provider/clinic for vaccinations that were given elsewhere, this is considered part of the item on complete immunization history, so is not considered here.

If the clinic name or address is missing from the child's immunization record, mark the record as "n" for no. If clinic name and address is not present in the record, provide ideas to the provider and clinic staff regarding how the situation could be handled in the future (purchase a stamp, have this information added to pre-printed immunization forms). The % results **and the # of records reviewed** will automatically appear in the site survey item. If the % results is < 60%, then answer the site survey item "n" and select the appropriate 'corrective actions/comments', or type in the 'Other Comments' area.

- **#7 Complete recording procedures: the date from the VIS is recorded for each vaccination given (site survey item #32).**

To accurately assess documentation of the date from the VIS provided, focus solely on the vaccinations that were given at this clinic. Documentation for the VIS provided should include the publication month and year from the VIS. Mark this record as "y" for yes if the date is written on the child's immunization record or if the clinic is placing the actual VIS in the child's record. If the date from the VIS is missing for any vaccination given, mark the record as "n" for no. The % results **and the # of records reviewed** will automatically appear in the site survey item. If the % results is < 60%, then answer the site survey item "n" and select the appropriate 'corrective actions/comments', or type in the 'Other Comments' area.

- **#8 Documentation of eligibility screening is noted in the record (site survey item #61a).**

All TVFC providers are required by the federal government to conduct patient screening for TVFC eligibility. The screening is based on a self-declaration by the parent. Providers are not required to verify that the parent's declaration is accurate. Screening should be done for new patients and reviewed at every visit for current patients. The completed TVFC Patient Eligibility Screening Form is effective until the child's category of eligibility changes. When that happens, a new form must be filled out. Regardless of type of screening documentation, Federal law requires the provider to maintain the screening record for three years.

Providers are encouraged to use the standard TVFC Patient Eligibility Screening Form. However, a provider may use another form or method, as long as it offers comparable documentation. Providers may document eligibility in the patient's chart or in an electronic data file.

The advantage of using a standard form is that it promotes consistency of eligibility documentation and is easily recognized and retrievable.

It is also important to note that immigration status does not affect a client's eligibility for TVFC. Immigrants should be offered the same vaccination services that other customers receive in public health clinics.

On the IRRT, indicate a "y" for yes if documentation of TVFC eligibility screening is found in the record, or "n" for no, if no documentation of TVFC eligibility screening is found in the record.

The screening rate in the field of site survey item 61a (Screening rate in this practice) is automatically populated from the IRRT.

If the % results is < 100%, then answer the site survey item "n" and select the appropriate 'corrective actions/comments', or type in the 'Other Comments' area.

- #9 Category of eligibility is (site survey item #61a).

The table below provides information regarding the eligibility categories for TVFC.

Eligibility Category Number & Name		Eligibility Types Included	Acceptable Documentation
1	Medicaid	Medicaid, Texas HealthSteps, CHIP, Star program, or other local indigent health program	Enrollment in Medicaid, CHIP, or other program documented somewhere in the medical record (generally billing/ Medicaid enroll forms). <u>**TVFC eligibility form may be used but is NOT required if records contains proof of Medicaid, etc.</u>
2	Uninsured	No insurance coverage and no indication of other enrollment in HMO, health plan, etc.	TVFC eligibility form or comparable eligibility form or documentation (ask staff).
3	Native American or Alaskan Native	Self-proclaimed classification of Native American or Alaskan Native	TVFC eligibility form or comparable eligibility form or documentation (ask staff).
4	Under-insured	“Under-insured” = parents cannot afford to pay for vaccines because insurance co-pay, deductible or lack of or exceeded coverage for vaccinations.	TVFC eligibility form or comparable eligibility form that serves for TVFC screening – or – written statement/ documentation that child is under-insured (cannot afford vaccines).
5	Not TVFC-eligible	Insurance covers vaccinations and/or parent reports coverage adequate. <u>**If eligibility is unclear, place child in this category.</u>	TVFC eligibility form or proof of insurance – generally in billing/ insurance section.

If the child has Medicaid and also has insurance that covers vaccinations, Medicaid is always used first, so mark the eligibility as category #1. Document the eligibility category in the IRRT by clicking on the pull-down box in the item #9 row and selecting the correct category number (see chart above, left column). On Item #61a in the site survey, click on the pull-down box in each category of eligibility to select the number of records reviewed that were found to be in each category.

The table below represents the relationship between the IRRT indicator and the site survey item.

IRRT Indicator	IRRT Indicator Number	Site Survey Tab – Item Number
Vaccinations administered on schedule	1	40
Simultaneous vaccination	2	29
Immunization histories	3	33a
Vaccine manufacturer and lot number	4	32
Nurse's signature, etc.	5	32
Clinic name and address	6	32
Date from the VIS recorded	7	32
Documentation of eligibility screening	8	61a
Category of eligibility	9	61a