

CALL TO ACTION MEETING - SEPTEMBER 13-14, 2006  
PROVIDER EDUCATION-NEW IDEAS

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- Provide in-service for vaccine updates. (flip chart 1)
- If change in staff, make sure they know what they are doing.
- Extra help to make our program stronger.
- Include a broader group of people to invite.
- More staff to be able to do more training for providers.
- Recognize providers.
- Funding to hire more staff.
- CME's.(continuing Medical Education hours)
- Neat incentives.
- More time. (flip chart 2)
- Incentive items:
  - Thermometer for refrigerator.
  - Pens.
  - Something that is useful to them, but is related to the health department.
- Do a better job promoting National Infant Immunization Week and National Public Health Week.
- We miss opportunities from having “tunnel vision” on immunization funding from other areas.
- Video on how to prepare the vaccines, size of needles, etc. (Discussed resources available- California Distance Learning, Immunization Action Coalition. (flip chart 3)
- Also focus on the doctors that are not enrolled in the TVFC program, on education, immunizations.
- Time.
- List of resources available (CDC offers-“Immunization Works” on CD Rom.)
- Recognition Banquet for providers-give recognition, friendly competition, incentives.
- Like to receive copies of enrollment and re-enrollment forms.
- Would like a report on provider issues to have for providing education and/or for knowledge.
- Do a non-scheduled site visit or a how are you doing? visit.
- Personal touch helps.
- Articles in Pediatric Journals promoting the Registry. (flip chart 4)
- Train volunteers to do the data entry in ImmTrac.
- Bar coding and/or scanning information so that information goes into the child's record in ImmTrac.
- Put magnets on city vehicles that promote ImmTrac.
- Target parents I marketing at the state level. (flip chart 5)
- Promote “Accurate” data entry into ImmTrac.
- Bar code babies at birth that follows them forever.
- Provide a computer/laptop for schools and providers so that they can use them for the use of ImmTrac. (flip chart 6)
- Provide wireless access for laptops.
- Pay providers for entering and using ImmTrac.
- Training tools (interactive) (i.e. DVD, internet based, etc.)
- Travel funds for us so we can travel to National Conferences and trainings. (flip chart 7)
- Train more than current VFC providers-also non-VFC and interns.

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- Make training include more than just paper work and reports-also how and where to give shots- (vaccine-university?)
- Burn a CD of the latest training (EPI-VAC).
- Vaccine administration video provided in tool kit.
- Observe them in their setting and try to correct things that you see they are doing wrong. (FC 8)
- Include training on how to hold a child appropriately for shots.
- Include CEU's as a part of the motivation for training-a standardized process for getting CEU's.
- Peer participation-having a physician who is doing great to provide assistance and training during the in-service.
- Provide specific education to the nurses in the birth hospital.
- Specific education regarding ImmTrac. (flip chart 9)
- When you have a physician that doesn't want to give the HEP B dose in the hospital-use that as an education opportunity for one-on-one with that physician.
- Educator to cover all these aspects-including true contraindications.
- Just because the doctor's don't see the disease-educate them on how important vaccines are.
- Wi-Fi capabilities. (flip chart 10)
- Laptops.
- Scare tactics material.
- Involve payors to cover all vaccines (HPV).
- Money.
- Retention.
- Education for health students (medical assistance, LVN's, RN;s.
- Provider update. (flip chart 11)
- Pharmaceutical reps provide lunches at meeting with providers.
- Monthly fax broadcast.
- Immunization workshop (full day) CEU's.
- Training.
- Technical assistance.
- ImmTrac training-hands on.
- VFC update (annual).
- Day-care training.
- Parenting class at hospitals.
- Media
- Knowledge of providers preferred communication mode.
- Provider education is very important, but take a lot of time. Have good repore with providers, good job. (flip chart 12)
- Quarterly in-service; updates in clued anything you need to know about immunization; provide literature, VFC newsletter; provide contact numbers; train new office staff; random visit to delinquent providers; temperature recording; end of the month reports with PIN#; training two sessions and follow-up.
- Solicit physicians into TVFC. Provide packet for training; any new information goes out our blast fax immedicately. (flip chart 13)
- Staff turn-around is a factor.
- Use of the Pink Book by providers.

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- Provide meetings with providers or staff on a regular basis; have nurse educators for training using a Power Point presentation.
- Other region staff are invited to attend other region's training sessions with providers to exchange ideas.
- Provide VFC training to student physicians at Universities. (flip chart 14)
- Be on top of vaccine expiration dates to avoid loss.
- Have a curriculum for medical assistances; they do not know how to administer shots.
- At least one staff member to visit providers on a regular basis to ensure vaccine management is being done correctly.
- Immunization department does not have enough to pay for staff to provide training.(flip chart 15)
- Provide a certificate of training when instructing office staff; can be an arduous process; to receive CEU's.
- Further educate nurses at birthing hospitals of the importance of documentation of Hep B (birth dose) on immunization records. (flip chart 16)
- Educate physicians and staff about "true" contraindications".
- Educate parents about vaccinating infants; of parents who object to vaccines.
- Educate VFC and nono-VFC providers on schedules and working relationships. (flip chart 17)
- Nurses to administer vaccine – offer more available times/days for vaccines.
- Cross train all employees.
- Day-care licensing personnel need training to read records; know schedules.
- Visit providers more often-monthly and develop rapport.
- Hep B Perinatal educator.- physicians and hospitals.
- Vaccine manager-works with providers. (flip chart 18)
  - Took kit-business card.
  - Follow up at one week.
  - Establish rapport.
  - Office managers are targeted.
- Luncheons for providers.
  - Vaccine manufacturer provider food.
  - Quarterly (two times should be maximum.)
  - Vaccine manufacturer on forum
- Train the nurse providers.
- Meet at other times for special issues-ImmTrac.
- Took Kit covers-schedule, temperature cards, rules, one hour initial training.
- Train new personnel.
- CASA reports. (flip chart 19)
- At beginning of school year-all schools nurses meet.
- Meet weekly with local health department nurses:
  - As updates.
  - In-depth monthly.
  - Schedules/new vaccine.
- Texas Medical Foundation reports-using the meeting as education opportunity.
- Luncheon day-cares.
- School Advisory Board.

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- Medical Director to Medical Society.
- Web-casts-notify providers.
- Electronic updates-fax and email.
  
- Technical schools: Train at this level (flip chart 20)  
Medical schools:
  - Train medical assistants.
  - Train medical techs.
- Electronic tool-kit.
- CEU for providers.
- Education opportunities at night.
- More staff for one-on-one training of providers-after recruit on PRN basis.
- Day-care education on schedules.
- Incentives for VFC providers:
  - Record management.
  - Good performance.
- Awards-more programs for CEU's. (flip chart 21)
- To learn to read a shot record at day-care centers.
- So children will be updated on shots.
- Classes for CEU's, nurses, Pediatric Associations, all-Hispanic Associations etc.-"conventions on Immunization".
- Package on contact information.
- Target area associations.
- Link with other entities.
- Hire staff member who has experience with Public Relations-health educator.
- To work on ImmTrac-staff.
- Relate with people-staff to educate.
- Staff-work with solo practice providers.
- Computers for providers to use. (flip chart 22)
- Provider staff to do ImmTrac input.
- Staff for recruitment and follow-up.
- Do own quality assurance visits.
- Immunization training for provider's staff. (flip chart 23)
- Develop educational video/booklet.
- Get physicians to stick to schedule.
- Get rid of shaded areas on the Schedule.
- Physician education (State provided form).
- Train on new techniques (hands-on/video). (flip chart 24)
- More resources.
- Train upcoming nursing school students.
- Improve immunization schedule.
- More staff. (flip chart 25)
- More technology (air card??) (laptops).
- More realistic information.

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- Funds for media for providers.
- Information for insurance companies.
- Peers educating peers program- immunization practices and how to implement their practice (practice management) – chief physician will attend with them. (flip chart 26)
- Send new stuff to them, copy Epi-Vac and send them a DVD of it.
- Yearly immunization workshops.
- Training to push and focus on ImmTrac.
- Staff member to go out and train one-on-one new TVFC providers.
- Web-based modules to be done t state level and sent out to be distributed to (flip chart 27) regions and locals for standardization-newsletter-presentations to be developed by state-mirror after WIC-uniform.
- Educate on a relevant topic-ex-medical reimbursement-show them how to increase their reimbursement (use billing specialist from children’s hospital).
- Motivate providers-recognition, food.
- Consolidate and simplify materials.
- Make a binder from the tool kit (take info out of the box and place on a binder).
- Make example of each form to train them on and how to complete the forms (C-33, etc.)
- Canned education via video, web-cast, DVD. (flip chart 28)
- Peer-to-Peer contact/networking-someone from high authority.
- Billing specialist to speak to providers.
- Honor providers at the Commissioner Courts.
- Staff goes to provider to train on ImmTrac for half day.
- Host conference with Regional office –one big training event. (flip chart 29)
- Have resources available.
- Have secretary to open five days a week.
- Need more staff!!!!
- Prioritize to make things better.
- Community relations person.
- Immunization collaboration group.
- After Epi-Vac to put it in **video???????** / hour for new providers.
- Have funding for health care education. (flip chart 30)
- Day-care registration meeting (registered home and day-care homes).
- Spanish speaking homes; day-care owner.
- Pharmacy school-local health department teach students how to give immunizations.
- Data entering, try students (college, medical assistants.)
- Unable to use training modules at local health departments.
- Have staff member to make sure ImmTrac applications get to Austin.
- Host training in conjunction with locals. (flip chart 32)
- Host school nurse luncheon.
- Community relations staff.
- Immunization collaboration to utilize planning of events through local ISD>
- Create one or two training.
- Provider educator for Day-cares. (flip chart 33)
- Staff to create literature in Spanish.

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- Access to ImmTrac training module.
- Offer CEU's, CME's. (flip chart 34)
- Birth Registrar's-ImmTrac consent competition.-certificates for 90 and above whose clinics have been good.
- Provider education-provide an item or two for counterparts.
- Promotional items that are high priced, recognizing providers who are doing good in their reviews. Example: Thermometers (ref/freezer); pens.
- Collaboration with business I the community – shopping spree, movie rentals, cruises.(flip chart 35)
- Additional staff-improve the education-doing what needs to be done.
- Recognize banquet/collaboration with business/annual training schedule.
- Recognize top ten advocates –TVFC providers.
- Staff-give attention that is deserved/recognition-providers.
- Recognition-more staff.
- Staff, time, money to purchase gifts.