

Texas Vaccines for Children 2007 Provider Site Visit Protocol

Overview

Texas Vaccines for Children (TVFC) site visits are conducted in order to:

- Improve the quality of immunization practices in TVFC provider sites
- Increase the immunization levels in children under two years of age, and
- Fulfill Centers for Disease Control and Prevention (CDC) contract/grant requirements.

By conducting TVFC site visits, we have an opportunity to visit with TVFC providers, increasing the number of Assessment and Feedback (AFIX) and TVFC accountability visits.

State immunization contracts contain language that requires TVFC site visits and provider recruitment. The contract between the Texas Department of State Health Services (DSHS) and TMF Health Quality Institute (TMF) standardizes the site visit activities including risk assessment, data collection and reporting.

The role of a TMF field reviewer is to:

- Schedule a site visit with the TVFC provider.
- Notify TMF staff when a site visit is scheduled.
- Conduct the site visit, during which the reviewer should:
 - Perform and complete the on-site evaluation report (DSHS Immunization Quality Assurance On-Site Evaluation Report), which includes the site survey, Immunization Record Review Tool (IRRT), and Gain/Loss Calculation Table (with recommended stock level).
 - Complete the Comprehensive Clinical Assessment Software Application (CoCASA) assessment if the provider provides care to children between 19 and 35 months of age.
 - Provide feedback, education and resource materials related to the site visit findings and the CoCASA report results.
 - Provide Reminder/Recall education when scheduled or requested by provider including provision of Reminder/Recall "Shot Box".
 - Suggest and promote opportunities for improvement of immunization practices in a positive and helpful manner.
 - Assist the provider to complete the annual re-enrollment paperwork to be submitted to DSHS via TMF. Encourage the provider to complete the new TVFC Site Visit Customer Satisfaction Survey that was sent with their confirmation letter, and provide the pre-addressed envelope for the provider to mail the survey back to DSHS.

- Deliver and guide the staff on how to install plug guards (if needed, and available from the DSHS). You do not need to install the plug guard.
- Deliver and review contents of the TVFC Provider Tool Kit, including any updates provided by DSHS (if available). Also provide any handouts or resources applicable to the site visit, including any ImmTrac promotional materials, if available.
- Educate the clinic staff on where and how to obtain updates and resources from DSHS or other immunization organizations, such as the Immunization Action Coalition (IAC) or CDC, via phone contact numbers, order forms or internet websites. The goal is to assist the clinic to become more self-sufficient in obtaining needed resources, education and updates.
- Notify DSHS immediately from the clinic, if there is an identified vaccine storage problem, i.e., problems with the refrigerator, freezer, or temperature control.
- Submit the site visit report packet to TMF, which should include the:
 - TMF Review Report Form (cover sheet with site visit details)
 - Completed TVFC Provider Re-Enrollment Form
 - DSHS Quality Assurance On-Site Evaluation Report and CoCASA data files (on disk or storage device)
 - Monthly Biological Report copies (C-33's for past 12 months)
- Order materials as needed from DSHS and TMF in a timely manner.

The local and regional health department staff is responsible for:

- Recruiting and providing initial training of new TVFC providers.
- Supporting and communicating with current TVFC providers.
- Providing DSHS Immunization Quality Assurance On-Site Evaluation Reports to the clinic.
- Follow-up on any phone calls or emails from TMF reviewers related to vaccine storage problems.
- Follow-up on any critical TVFC component with “no” answers on DSHS Immunization Quality Assurance On-Site Evaluation Reports.
- Handling official withdrawal of a provider from TVFC and pick up remaining vaccine stock

DSHS Austin Office

- Reviewing “Site Visit Customer Satisfaction Surveys”.
- The DSHS staff in the Austin office is responsible for conducting an annual performance review of each TMF field reviewer.

Scheduling the Site Visit

Review your site assignment list

To start the site visit process, you will be given a “Site Assignment List”, which details what provider sites you will be expected to contact and visit. Each site assignment list contains the provider and/or clinic name, address, phone, fax and contact person. In addition, below the site information is the site visit history. If the provider has received any previous TVFC or AFIX visits, the dates, past reviewers and types of surveys done will be listed in this history.

Prioritize your sites

The goal of the DSHS TVFC quality assurance program is to conduct site visits annually for as many providers as possible. To keep providers as close as possible to an annual schedule, you will want to prioritize any sites that did not receive a site visit in the previous year, or have not had one at all. These are the first sites you should contact and schedule visits for. You may find some sites with no site visit history are actually new TVFC providers. Usually you can tell if this is a new provider by looking at the PIN – it will be a higher number and the site most likely at the end of your site assignment list. With new providers, you will need to ask them how long they have been receiving TVFC vaccine. A new provider should be receiving vaccine for at least 6 months before receiving their first TVFC site visit.

Determine possible site visit date ranges

DSHS determined that the “annual” site visit can be conducted within a three-month window on either side of the date of the prior visit, i.e., as early as 9 months or as late as 15 months after the prior visit. It is recommended that the visit occur within 9-12 months of the previous visit. For example, if the prior visit was done in June 2006, the 2007 visit could occur anytime between March and September. Use the site visit history information for each site to determine when to schedule the visit for that site. You may find that clinics are generally more willing to schedule on certain days because of the typical clinic workload. When you contact the clinic, ask them what days are the most amenable for a visit. Consider holidays and seasonal “rushes” like school start dates, as these may affect site and staff availability.

Determine whether you will be doing a CoCASA (“A”, “B” or “C” site)

There are three major types of TVFC sites, based on survey type:

- The “A” site (TVFC survey & CoCASA)
 - For TMF site survey purposes, a CoCASA of 50 records is performed on children in the age range of 19-35 months of age. A minimum of 10 records in the age range of 24-35 months is required for a CoCASA. If the clinic cannot provide the reviewer with ten records in this age range, or if the clinic does not have children in the CoCASA age range, you will use the results of the IRRT indicator #1 “percent of children up to date on immunizations.” Some family practices do not see the younger age group; schools, juvenile detention facilities, and state run facilities typically do not see children in the CoCASA age range.
- The “B” site (TVFC survey only).
- The “C” site (TVFC survey, CoCASA & Reminder/Recall education)

To determine which type of site you have:

- Look to see whether a CASA or CoCASA was done at the last site visit.
 - If a CASA or CoCASA was done, the provider probably sees children in the CoCASA age range; most likely you will be performing a CoCASA assessment.
 - If there is no site visit history, find out whether the provider is a family practitioner or a pediatrician, and ask about the volume of preschoolers seen in the clinic. You can query the contact person regarding this when you make the scheduling phone call.
- TMF will either notify you ahead of time which providers qualify for Reminder/Recall education (you will be sent a list of providers) or you will determine the need during the visit based on CoCASA results and/or the answer to 35a&b on the Site Survey tool (*for more complete information, please refer to your Reminder/Recall training material under the "Reminder/Recall" tab in your Reviewer Resource Manual*).
 - If you discover at the time of scheduling the visit, that the provider has already participated in the Reminder/Recall training, additional training is not required unless requested by provider

When you contact TMF with scheduled visit information, let the staff know whether the site is more likely to be an "A", "B" or "C" site.

Schedule the visit

To schedule the visit, call the provider's office and ask to speak to the contact person, the office manager or the person who manages the state-provided vaccine. Introduce yourself and inform this person of your plans to conduct a site visit in the near future.

Key points to cover when making the scheduling phone call:

- You are a, "Registered/or Licensed Nurse Reviewer working on behalf of the TMF Health Quality Institute to conduct site reviews for the Texas Department of State Health Services Vaccines for Children Program."
- The purpose of the TVFC site visit is to perform:
 - A review of vaccine-related practices in the clinic.
 - An assessment of immunization status (% of children in the clinic "up to date" on immunizations by their 2nd birth date) via medical record review.
 - Provide education and advice based on the review findings.
 - Provide and/or suggest materials and resources to help the clinic improve and update immunization practices.
- THE SITE VISIT IS NOT AN AUDIT – the key purpose is to provide advice and resources to help the clinic better manage its immunization program – a great "free educational opportunity" for staff
- The average time for a site visit is about 4-5 hours, but varies depending on the experience of the reviewer, the condition and number of medical records abstracted for the CoCASA, and the amount of education required for the specific site. The majority of time will be spent reviewing medical records and other

materials (VISs, temp logs, etc.), so dedicated staff/contact time needed for interviews and education is usually less than an hour.

- Ask the clinic if they can have available:
 - A place to set up your laptop computer and review records.
 - A contact person to work with.
 - Medical records for the CoCASA or IRRT – they will receive instructions with the confirmation letter about pulling 75 records in a specific birth date range.
 - C-33s for the past 12 months.
 - DSHS Temperature Recording Forms (C-105) for the past 3 months.
 - Set of VISs currently in use.
 - Any written policies or procedures used for immunization/vaccine management.
- If the clinic has an electronic medical records (EMR) system, ask how they plan to allow you access to the medical records. If they are unsure about what to do, discuss with them the two options for retrieving records and decide what approach would be best (see section “possible difficulties...” below). Let them know that TMF will fax specific information for clinics with EMR systems with the confirmation letter.
- Schedule the site visit date and time. Sometimes a provider will let you come before the clinic opens to get started. Be sure to verify the fax number and address at this time.
- The clinic will receive a confirmation letter, via fax, approximately 14 days ahead of the visit, detailing everything they need to know about the visit, including what they should have ready and what areas will be assessed. If the clinic has any questions about the site visit, they can contact TMF (phone number is included in the confirmation letter). If you would rather have the clinic call you directly about changes in schedule, etc., you may give them your phone number, but this is not necessary. TMF will contact you if a clinic calls to reschedule or needs to speak with you.

Possible difficulties encountered when scheduling

- The contact person does not accept or return your phone calls after several attempts.
 - Email or call TMF with the details and some proposed dates for your visit and we will contact the clinic to schedule your visit.
- The provider or staff is hesitant about setting a visit date.
 - Stress that continued participation in TVFC is based on annual completion of the provider enrollment form, which is done in conjunction with the site visit. Having the annual site visit completed in a timely manner will assure that their vaccine supply is not interrupted. (Stay positive – do not tell them they won't get vaccine if they don't have a visit.)
- The clinic wants to delay a site visit due to recent staff turnover.

- Tell them the visit focuses on a combination of what happened in the past (immunization records, C-33s, C-105s) and current practices – so even with recent staff turnover, the visit can be useful to highlight areas for improvement. Stress the educational aspect of the visit and that TVFC site visits are a great opportunity for new staff to learn more about the program and “get started on the right foot”.
- The provider says that they have never had a visit by DSHS before, or “this is something new.”
 - Mention that the DSHS TVFC wants to conduct an annual assessment and educational visit to each provider, as mentioned in the TVFC Provider Enrollment Form.
- There is a question about the site being a public health clinic of some type.
 - Ask if the clinic is staffed by local or regional health department staff or if it is a WIC site. If it is, email or call TMF with the information you have. We will contact DSHS to clarify the status of the clinic and then email you with information on how/if to proceed.
 - TMF will be conducting site visits at selected public sites, but not those sites staffed by local or regional health department staff or WIC sites. Public sites that may be reviewed by TMF reviewers include Federally Qualified Health Centers, Rural Health Centers, public schools, public hospitals and fire departments.
- The provider says that they have not yet received any TVFC vaccine or that they have not yet seen any children.
 - Ask the provider when they plan to order vaccine and begin seeing children, even if it is an estimated date. The first site visit to a new provider should not be scheduled until the clinic has had vaccine for at least six months. Tell them that you will contact them in approximately six months to schedule a site visit. Email TMF to indicate that this site visit will be delayed.
- The provider says that DSHS or the local health department recently did a visit.
 - Obtain the following information: when the visit was, what the visit focused on (the program), and the name of the person who conducted the site visit, if possible.
 - Compare the visit history information on your list of assigned sites to when the clinic says the most recent visit was. If the visit occurred approximately six-eight months after the most recent date on your visit history, it may have been a visit for follow-up on a low immunization rate. Typically, the local or regional staff would do a CoCASA and also check the refrigerator temperatures. Clinic staff may easily confuse this with an annual site visit.
 - DSHS has many programs and some private providers have multiple contracts with DSHS. DSHS tries to coordinate one site visit for clinics with multiple contracts, but this is not always possible. The TVFC review will focus specifically on immunizations. The Medicaid/Texas Health Steps program also does site visits that clinic staff could mistake for a TVFC site visit.
 - Email TMF with the clinic name, the name and/or affiliation of the reviewer and the approximate date of the visit. When the situation is clarified, we will notify you.

- The provider says they only serve children under one or over three years of age.
 - Go ahead and schedule the TVFC visit, mentioning that the site visit will entail completion of the DSHS Immunization Quality Assurance On-Site Evaluation Report, but the record review will focus on a review of 10 records of TVFC-eligible children (IRRT). The clinic will be asked to pull 15 records of TVFC-eligible records of children of any age. See the IRRT instructions for more details. The CoCASA is not performed at these sites.
 - When you send TMF your email with the site visit date and time, please also indicate that TMF should send the "B" letter. This letter is the same as the regular confirmation letter, except for the number of records to be pulled and the ages of the children.
- The provider reports they see a limited number of children between one and three years of age.
 - Ask them to pull as many records in the appropriate age group so that you can enter these records into CoCASA. Let them know that they will still receive a letter asking them to pull 75 records.
- The provider is reluctant to let you conduct a record review because of concerns about confidentiality.
 - Be aware that the clinics are working on being compliant with the regulations in the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Information gathered for this review is exempt from HIPAA (see the resource materials in this section). Let the clinic staff know that no information identifying a client is taken out of the clinic and that the information gathered during the record review will be used to provide feedback to them to improve their immunization practices. Inform them that all reviewers are bound by confidentiality policies. Offer to share a copy of the policy with them.
 - Because the primary focus for the record review is on immunization status and eligibility determination, the clinic could copy and de-identify the one-page immunization record and the eligibility form from the medical record, being sure that the child's birth date is available for inclusion in CoCASA.
- The provider is reluctant to let you review records of patients who are not eligible for TVFC.
 - Inform the staff that Texas ranks 24th in the nation in immunization status (4:3:1:3:3:1 rate) for all children, not just TVFC-eligible children. A representative sample of all patients between 19 and 35 months of age in the practice is taken with the belief that TVFC patients are treated no differently than patients with insurance. If they insist you review only records of TVFC-eligible children, agree to this and note this on the DSHS Immunization Quality Assurance On-Site Evaluation Report.
- The provider/staff report they have archived some records.
 - Clarify that we want to review records of only active patients, i.e., those who have had at least one well-child visit or two visits for any reason within the past year. Clarify the time period for the

archived records. For example, if records from 2004 are archived, you could still review records of patients seen in 2005 and 2006 for the CoCASA.

- The provider or staff balks at pulling 75 records.
 - Let them know that your goal is to enter 50 records in the designated age bracket into CoCASA. If they are extremely careful about selecting only records of children in the birth date range provided, they can stop after pulling the first 50 records. Let them know that the confirmation letter will still ask them to pull 75 records.
- For clinic staff that balk at pulling records, you can also suggest other means to minimize their time in pulling appropriate records.
 - Make sure the staff are aware that the number of records reviewed may have an affect on their site survey results (i.e., if they only have 10 charts pulled and 5 of them have missing immunizations, they will get a lower immunization rate result than if they have 20 charts pulled and 5 have missing immunizations).
 - Make sure you remind staff that pulling as many qualifying records as possible is an educational opportunity to identify and get a true picture of areas that need improvement
 - Ask billing staff to review any recent billings to determine if any children are in the correct age bracket. Focusing on Medicaid or CHIP billing may help to obtain the necessary 10 records for the IRRT.
 - Encourage them to have all staff aware of the need for records in the age bracket and enlist them in obtaining records by keeping a list of children who are in the age bracket who are seen between now and the actual visit date, to be used later for the actual record pull.
 - Ask staff to consider if any of the adults seen in the practice have children in the age bracket or if any of the children seen have siblings in the age bracket.
 - Encourage staff to look through records from visits earlier in the week that have not yet been re-filled and at records pulled for upcoming visits, to see if there are any children in the age bracket.
 - If the clinic is still very hesitant, you may offer to help them pull records (if you are willing to do this).
- The provider says they use an electronic medical record (EMR) system.
 - Clinics with an EMR have two options for their medical record review. They could make a computer terminal available to you and provide instructions to you on how to access the parts of the EMR where immunization and eligibility information can be found, OR they could print out the immunization records and documentation of the child's eligibility from the EMR. Let them know that any printouts need to include the child's birth date. Also, immunization records need to include any immunization history (records from other providers).
 - Be sure that they have some type of electronic signature/initials in the EMR and a matching signature log outside of the EMR system.

- TMF will include information about surveys related to the clinic's use of an EMR system in its confirmation letter.

You will find that scheduling site visits takes a bit of “salesmanship”: Be pleasant and focus on the educational aspects of the visit -- but be assertive enough to “close the deal” and get a tentative site visit date scheduled before you end the call.

If you have any questions or problems when scheduling a site visit, please call or email TMF staff.

Notifying TMF of the Scheduled Visit

After you have set a date and time with the clinic:

- Contact TMF staff (see TMF Staff Contact list in front of Notebook) via email (preferably) or telephone
- If the MAJORITY of your sites have a PIN that begins with:
 - 01-08, please email to (see TMF Staff Contact list)
 - 09-11 or 25-, please email to (see TMF Staff Contact list)
- Provide the following information:
 - The clinic's PIN
 - Name of clinic/provider
 - Any corrections to the name of the contact person, phone/fax number or address
 - Date of visit
 - Time of visit
 - If the site does not see children between 19 and 35 months of age, indicate that the “B” letter should be sent.
 - Any special instructions regarding the confirmation letter, e.g., if the clinic wants the letter within a certain time period, or if they want it mailed instead of faxed.
- After TMF staff posts the information about newly-scheduled visits from your email, you should receive a confirmation message back (something simple like “received”). If you do not receive this message, please either re-send your email or call TMF with the information.
- TMF will routinely fax to the site:
 - a confirmation letter
 - re-enrollment papers pre-populated with last year's information
 - a “TVFC Site Visit Customer Satisfaction Survey”, and
 - information regarding Electronic Medical Record (EMR)
- If TMF is notified about a visit scheduled more than two weeks ahead, these items will be faxed (or mailed, if the clinic prefers) to the clinic approximately 14 days before the scheduled visit date.

- TMF will send a list of scheduled visits to the DSHS staff throughout the state on a regular basis. This information is then forwarded to the local health department staff involved in the TVFC program. Staff from the local or state health department may decide to accompany you on any visit if their schedule permits.

Preparing for the Site Visit

Before the visit, make sure that you have the appropriate tools and supplies:

- The laptop computer with all TVFC survey software loaded.
- The “TVFC Resources for TMF Reviews” notebook (also known as your Resource Notebook)
- A clean copy of the TMF Review Report Form.
- A copy of your Authorization Letter.
- A clean copy of the TVFC Site Assessment Summary form.
- A thermometer, issued from DSHS; (new thermometers may become available throughout 2006 for TMF reviewers to provide to clinics; be sure to avoid exposure to extreme temperature, i.e., do not store this thermometer in your car during the summer).
- In case the laptop quits working, paper versions of the:
 - DSHS Immunization Quality Assurance (QA) On-Site Evaluation Report Tool.
 - IRRT.
 - Gain/Loss Calculation Table.
 - CoCASA forms (at least 50).
- A blank disk or jump drive on which to copy the CoCASA and DSHS Immunization Quality Assurance On-Site Evaluation Report.
- A blank label to apply to the floppy disk (label with clinic PIN & name, city, site visit date).
- Any handouts or resources from TMF.
- Any handouts or resources from DSHS (e.g., plug guards, TVFC Provider Tool Kits and updates when available).

All of the materials listed in all except the last bulleted item can be ordered via an email or phone call to TMF staff. Allow several days from the date of the order to receive the materials. Plug guards, thermometers **Reminder/Recall “Shot Box”**, and tool kits can be ordered by contacting Amy Schlabach at DSHS. You can either email her at Amy.Schlabach@dshs.state.tx.us or call her at 1-800-252-9152 to let her know how many of each of these items you need and to provide your complete mailing address. Ask that the package be “left without signature.” Expect the shipment to arrive about two-three weeks after you place your order. All other DSHS forms need to be order by calling Jack Shaw at 1-800-252-9152 or by using the DSHS website ordering form.

Confirming the Site Visit

As a courtesy to the clinic and to minimize any surprises, please contact the clinic 24-48 hours before the visit to:

- Confirm that they are expecting you on the site visit date and time.
- See how their workload looks for the visit day, so that you can plan for efficient completion of the visit, and
- Answer any questions they may have about getting ready for the visit.

What if the clinic contact tells you they “forgot” or “aren’t ready” and want to reschedule the visit?

- Let them know that you want to proceed with the visit and will work with/around any problems that have arisen.
- If they haven’t pulled records for review yet, they can start pulling records now, or even pull records after you arrive while you conduct other aspects of the review. You may even offer to help them pull records, if necessary.
- If you and the clinic staff come to a mutual agreement to reschedule the visit, contact TMF staff via email or phone to advise of the new visit date and to determine if a revised confirmation letter needs to be sent. Do this as soon as possible so changes can be made in the TMF administration system.

Conducting the Actual Site Visit

Some key things to remember:

- Arrive at the designated office site at the scheduled time with the appropriate work materials.
- Exhibit a professional demeanor and dress.
- Your words and manner should portray a customer service approach rather than an audit approach.
- You should meet with the contact person and at least one of the providers (MD, DO, NP or PA). The contact person can be the office manager, the staff person(s) who orders TVFC vaccine, the staff person(s) who administers TVFC vaccines, or the actual provider. The doctor will probably be available for only a brief time, and does not need to be there for the entire interview and/or education.
- Maintain confidentiality of client and clinic information according to the terms of TMF’s Annual Policy Certifications Form.

Key Tasks:

- Introduce yourself and give contact information:
 - When you arrive at a scheduled visit, give the contact person a copy of the Authorization Letter and point out the last two paragraphs about who to call for what. Provide the clinic staff person with the name and phone number of the specific contact person at the local or regional health department, using your list in your Resource Notebook. If you are running low on copies of the authorization letter, contact TMF staff for additional copies.

- Note: TMF does not provide business cards. Please use the Authorization Letter and your driver's license as identification.
- Obtain completed Re-Enrollment Form from the clinic staff:
 - See Re-Enrollment Guidelines ("Miscellaneous" tab in Notebook) for instructions. There are two major reasons for addressing the re-enrollment paperwork early in the site visit. The first reason is that it may help reduce anxiety that the staff has about the site visit, by letting them know that they are re-enrolled regardless of the findings during the visit. If the paperwork has not already been completed, there is time for the physician (or other responsible party) to sign the form before you leave the site.
- Check to make sure the provider has a copy of the "TVFC Site Visit Customer Satisfaction Survey" and give the contact person an envelope to mail the completed survey to DSHS.

DSHS will be conducting satisfaction surveys on TVFC provider site visits. The provider will receive the survey form as part of the confirmation letter packet. Make sure the clinic still has their copy – if not, provide another copy. Give the contact person a pre-addressed DSHS envelope to mail their completed survey in. Encourage the provider or staff to complete the survey.

- Set up your work area and decide with the contact the best way to conduct the site visit:
 - Spend the first few minutes with your contact person getting set up in your work area and planning the site visit. Give a brief overview of your site visit tasks, so your contact has an idea of what areas you need to be in, and what resources you might need. Ask the contact how you might best approach this, considering staff availability and clinic workflow. Ask which staff members might be involved in the visit (i.e., billing staff for eligibility, reception for recall/reminder, nursing for vaccine management, etc.)
- Perform an initial interview and medical record review with the contact:
 - Before you perform any survey tasks, it's best to get some initial information about the clinic, its processes and documentation.

Some initial questions you might want to ask are:

- What is your general clinic population – number of children seen, any challenges due to the population, location, etc.
- Are there any areas where you think your clinic would like more direction or resources?
- What would your clinic like to get out of this site visit?

Note: These initial questions might help you answer some survey items also.

Next, you should review 2-3 medical records with your contact person to see where these items are documented:

- Immunizations (immunization summary form)

- At-birth immunizations & immunizations given elsewhere (how are these collected and transcribed?)
- Varicella – documentation of chicken pox infection
- TVFC eligibility forms & eligibility verification (billing information)
- Moved Or Going Elsewhere (MoGE) – documentation that child is no longer an active patient
- Exemptions – documentation of medical or religious exemptions

Finally, you should ask for any paperwork applicable to completing the survey:

- C-105s for the past 3 months
- C-33s for the past 12 months
- Policies & protocols related to vaccine management and/ or emergency procedures
- Documentation or examples of staff education on vaccine management

Perform the assessment, with feedback and resources given as needed.

Most reviewers complete the site survey in this order; however, you may need to adapt this a bit as staff availability may require some flexibility:

- CoCASA – medical record review (10-50 records)
- IRRT – medical record review (10 records)
- Vaccine storage – observation of facilities & temperature check
- On-Site Evaluation Report (survey tool) – interview, review of VISs & other applicable paperwork, including the C-33s and C-105s

Verify that there are protocols in place for the retrieval and safe storage of vaccines in the event of emergencies such as power failures. Ensure that a knowledgeable person has been identified as a back-up should the primary person not be available. Also, you may find it is easier to perform much of the feedback and education while actually completing the site survey assessment activities.

Meet with clinic staff to perform the post-assessment conference & additional education:

- After performing your site survey, you will meet with the clinic contact, appropriate staff and/ or the provider.
- During this time you should review your findings:
 - Discuss opportunities for improvement of immunization practices (see TVFC Site Assessment Summary Report). Note both strengths and weaknesses in the clinic's program.
 - **Conduct scheduled/requested Reminder/Recall training**
- Provide the clinic with a written TVFC Site Assessment Summary Report, which includes:
 - DSHS contact
 - Local FQHC/ RHC for referral of under-insured.

- CoCASA rates (4:3:1, 4:3:1:3:3 and 4:3:1:3:3:1) and number of records used to compute rates.
- Specific education done to improve immunization rates.
- Recommended 60 day vaccine stock levels, based on C-33s.
- Additional comments or recommendations.

NOTE: Let the clinic know that DSHS may choose to follow-up on any “no” answers on the site survey. Also, if the clinic is interested in getting a copy of the site survey or CoCASA report, they may contact their Regional or Local contact, but to wait at least one month before requesting this.

- Inform the clinic of any applicable updates or changes in the TVFC program.
- Provide resources appropriate to your findings. Try to focus on helping clinic staff become more self-sufficient by giving them contact phone numbers and where to obtain DSHS order forms and resources on the internet (DSHS, IAC and CDC web sites). This might include showing the clinic staff how to access online resources via the internet.
- Hand out and review any additional materials as requested by the DSHS:
 - DSHS Provider Tool Kit or updates, when available.
 - Plug guards; describe how to install and give written instructions from DSHS. You are not required to help install them.
 - ImmTrac promotional materials, when available.
 - New DSHS provided thermometers, as available.
 - **Reminder/Recall “Shot Box”.**
- For certain vaccine storage problems you will be expected to contact the appropriate local and/or regional health department personnel, prior to leaving the clinic (see On-Site Evaluation Report (site survey instructions). Use the contact lists provided in the Resource Notebook. Document when and who you contact, the means of contact, and the response, if any, on your On-Site Evaluation Report.

Have the clinic contact verify and sign your TMF TVFC Review Report Form

Thank the clinic staff for being cooperative and helpful. Refer any further questions about the TVFC to the local or regional TVFC contact. Let the clinic know there may be a follow-up call or visit, but that DSHS will contact them if necessary.

Maintain confidentiality

Make sure you maintain confidentiality of client and clinic information according to the terms of TMF's Statement of Policy on Confidentiality. Double-check your work space and carrying cases so that no records have inadvertently been taken out of the clinic. Make sure all records are neat and organized for staff to re-file. Clean up your work space if necessary.

Sending Completed Site Survey Reports

At the end of each week, use the FedEx envelopes and pre-addressed labels to send your site visit documentation for that week to TMF:

- Fill in your return address information in the upper left boxes.
- Be sure the “Priority Overnight” box in section 4a is checked.
- Include the completed TMF Review Report Form.
- Include the copies of the Monthly Biological Reports (C-33).
- When using the jump/flash drive, first create a folder on the jump drive labeled with the PIN and clinic name (same naming as site survey file, name on Re-Enrollment form) and then save:
 - Completed On-Site Evaluation Report (site survey tool): site survey file. The site survey file also includes the completed IRRT and completed vaccine gain-loss worksheet.
 - CoCASA file (“A” and/or “C” site)

The jump drive is marked to identify which TMF reviewer is using it.

- Include the signed provider re-enrollment paperwork (all pages), with any revisions noted and with Patient Profiles numbers totaled (rows, columns, overall total); check the math and correct as needed. **Make sure all NPI and/or License numbers are completed for MD, PA and NP.**
- If you had a computer problem during the site visit, send the following paper versions of the reports to TMF, in lieu of the disk or jump drive:
 - On-Site Evaluation Report: Site Survey
 - IRRT
 - Vaccine Gain-Loss
 - CoCASA report
 - TMF Review Report Form

Add any other relevant documentation acquired during the provider site visit.

If you have any questions or problems when scheduling or performing a site visit, either call or email TMF staff or give the clinic TMF’s toll-free number (1-866-320-0963). Refer to the TMF Contact Sheet for more specific information on who to contact if you have a question or problem.