



Template Optional Objectives for Adult Immunization

- A Objective Statement** **D Input Activities** **G For Your Information**
- B Deliverable** **E Base Line for Measurement**
- C Context** **F Data Source for Measurement**

Select at least one adult immunization objective (A). The Adult Immunization contract cycle will be May 1, 2016 through June 30, 2017 (14 months).

A. By June 30, 2017, xx% adults aged ≥19 years residing in (insert name of tribe or local health department jurisdiction) will have received a dose of Tdap.

A. By June 30, 2017, xx% adults aged 19-26 years residing in (insert name of tribe or local health department jurisdiction) will have completed the three-dose HPV vaccine series.

A. By June 30, 2017, xx% adults aged ≥60 years residing in (insert name of tribe or local health department jurisdiction) will have received a dose of zoster.

A. By June 30, 2017, xx% adults aged ≥65 years residing in (insert name of tribe or local health department jurisdiction) will have received a dose of PCV13 and PPSV23.

A. By June 30, 2017, xx% adults aged ≥19 years residing in (insert name of tribe or local health department jurisdiction) will have received a dose of 2016-2017 seasonal influenza vaccine.

B. A Wisconsin Immunization Registry (WIR) generated population-based standard benchmark report documenting the number of adults in (insert name of tribe or local health department jurisdiction) with an age-appropriate indication during the 14-month contract cycle. Reports should be run with a 45 day buffer to ensure that all updated data has been received by the Wisconsin Immunization Registry (WIR). Include a report of the accountability targets and the progress achieved including the activities and interventions conducted; include any barriers that may have been identified. A summary of progress made on the selected objective(s) will be required at project mid-point.

Date of birth range:

19-26 years: 7/1/1990-6/30/1998

≥19 years: ≤6/30/1998 (use 1/1/1900-6/30/1998 in benchmark report)

≥60 years: ≤6/30/1957 (use 1/1/1900-6/30/1957 in benchmark report)

≥65 years: ≤6/30/1952 (use 1/1/1900-6/30/1952 in benchmark report)

Evaluation date: 6/30/2017

Run date: 8/15/2017



C. Adults will be assessed using the benchmark report for having a dose or doses of (insert vaccine name). Progress towards reaching 90% will be measured using a WIR benchmark report. Only adults who have moved out of the agency's jurisdiction may be removed from the cohort for analysis. Unless you can prove that an adult has moved out of your jurisdiction, you cannot remove them from your cohort.

Guidelines for determining increase needed for progress toward contract cycle goals:

20%-29% - 8% above baseline

30%-39% - 7% above baseline

40%-49% - 6% above baseline

50%-59% - 5% above baseline

60%-69% - 4% above baseline

70%-79% - 3% above baseline

80%-85% - 2% above baseline

86%-89% - 1% above baseline

≥90% - maintain

Agencies should consult with their Regional Immunization Representative for assistance with determining activities and interventions that will help them achieve the required increase for their population assessment.

D. The Wisconsin Immunization Program recommends the following activities to help ensure the success of this objective:

Coordination of immunization services with other LHDs and/or tribal health clinics.

Sharing information on the Adult Immunization Standards with local health care providers (e.g., during educational sessions or coalition symposiums)

Requesting that adult vaccine doses administered are entered into the WIR

Reminder and recall interventions (e.g., letter, phone call, home visit)

Work with local health care providers to establish standing orders for adult immunization

Use the available billing toolkit to implement a system to bill insured clients for immunization services provided.



Attend an Immunization Program-approved adult immunization conference (using up to \$500 of adult immunization grant funds) and plan for disseminating information gathered during an educational session with local health care providers (e.g., during educational sessions or coalition symposiums)

E. The 2015 end of year population based standard benchmark report will be used to determine the baseline for the current adult population based objective.

For the baseline the following parameters will be used to run the benchmark report:

Date of birth range:

19-26 years: 1/1/1989-12/31/1996

≥19 years (Tdap): ≤12/31/1996 (use 1/1/1900-12/31/1996 in benchmark report)

≥19 years (Influenza): ≤7/1/1996 (use 1/1/1900-6/30/1996 in benchmark report)

≥60 years: ≤12/31/1955 (use 1/1/1900-12/31/1955 in benchmark report)

≥65 years: ≤12/31/1950 (use 1/1/1900-12/31/1950 in benchmark report)

Evaluation date: 1/1/2016 (for Tdap, HPV 3, Zoster and Pneumococcal), 6/30/2015 to assess the 2014-2015 influenza season coverage rates.

Run date: 2/15/2016

F. Wisconsin Immunization Registry

Directions on how to pull benchmark reports from the WIR:

1. For all objectives: LHDs should choose “Clients Residing in (your jurisdiction)” and Tribes should choose “Clients Associated with (your tribal health division)”.
2. Choose “All Clients, regardless of whether they met the benchmark report or not”.
3. Use the birth date range (outlined above) associated with your objective and the timing of the report you are running.
4. Choose a “Standard Assessment”.
5. Use the evaluation date (outlined above) associated with the timing of the report you are running.
6. Select the benchmark that is associated with the objective you chose.

Tdap:

	Hep B	Influenza	Pneumo-Poly	Td	Tdap	Zoster
Adult	COMPLETE	UTD	COMPLETE	UTD	1	1



3-Dose HPV Series:

	Hep B	HPV	Meningo	MMR	Td	Tdap	Varicella
Adolescent	COMPLETE	1	1	2	UTD	1	2
Adolescent Complete	COMPLETE	3	1	2	UTD	1	2

Zoster:

	Hep B	Influenza	Pneumo-Poly	Td	Tdap	Zoster
Adult	COMPLETE	UTD	COMPLETE	UTD	1	1

PCV13 and PPSV23

	Hep B	Influenza	Pneumo-Poly	Td	Tdap	Zoster
Adult	COMPLETE	UTD	COMPLETE	UTD	1	1

Influenza

	Hep B	Influenza	Pneumo-Poly	Td	Tdap	Zoster
Adult	COMPLETE	UTD	COMPLETE	UTD	1	1

7. Click 'Generate'.

G. Funding restrictions

- Awardees may not use the funds for research.
- Awardees may not use funds for clinical care.
- Awardees may not use the funds to purchase vaccine.
- Generally, awardees may not use funds to purchase furniture or equipment.
- No funds may be used for publicity or propaganda purposes.
- Awardees may use funds for reasonable purposes, including personnel, travel, office supplies, and services.