Improving Ob-Gyn Immunization Services for Comprehensive Women’s Health Care

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BACKGROUND

The Centers for Disease Control and Prevention funded the College to select 60 ob-gyn practices in ACOG District V to pilot and evaluate an innovative, office-based training program to motivate and educate ob-gyns to improve immunization services within their practices. Previously, state health department officials in these states (Indiana, Kentucky, Michigan, and Ohio) cited challenges in accessing ob-gyn practices around immunizations. In addition, many women see their ob-gyn as their primary care provider, thus, reinforcing the need to be able to receive immunizations from their ob-gyn. Ob-gyns indicate that their practices could benefit from having additional education and local resources they could contact on immunization.

OBJECTIVES

1) To create and expand ob-gyn practice-based immunization programs
2) To increase the types and doses of immunizations provided in ob-gyn practices
3) To create a sustainable partnership between ob-gyn practices and each of the four participating state health departments’ (SHD) immunization programs (Indiana, Kentucky, Michigan, and Ohio) that would be able to provide resources after the conclusion of the project

RESULTS

97% of participants responded to the post-test survey
• 29% of practices report they have increased vaccine doses from their pre-test rate.
• 48% of practices from IN, MI and OH are now participating in the state immunization registry; an additional 12% are interested in enrolling.
• 83% report they now have the name of a SHD contact person they can reach with questions about immunizations, an increase from 48% at the time of the pre-test.
• Over three quarters of participating practices have an immunization coordinator (Graph 1).
• The largest increases in types of immunization in practices were Tdap, Hepatitis B and MMR (Graph 2).

CONCLUSIONS

Ob-Gyn practices stated that they were more likely to promote immunizations within the office if they knew leadership at both the College national and district levels endorse it. In addition, having an immunization coordinator was very important to sustainability of the practice's immunization efforts as it established a point of contact. On-site training was useful as it provided needed educational information and also required minimal disruption of the practice to have staff attend a one hour on-site training. A key benefit of the training was having a local immunization expert that practices could contact for immunization information and resources. All of these factors helped motivate ob-gyn providers to increase their level of immunization activities in the three months following the pre-test. Immunization programs can be sustained within ob-gyn practices, creating opportunities for ob-gyns to provide more comprehensive care to their patients.

METHODS

• College staff selected 15 practices in each District V state for a total of 60 practice sites.
• A pre-test was administered to each participating practice to gain baseline information about the practice’s current immunization program.
• Contact with each practice was initially made by College staff; each site received a one hour training designed and conducted by SHD staff and College staff.
• This one hour on-site training addressed a core set of immunization topics previously identified by SHD staff and College staff.
• Core materials were used at each on-site training to address identified immunization topics including information on ordering vaccines, proper storage and handling, vaccine administration, coding and reimbursement for immunization, updated immunization schedules, ACOG committee opinions concerning immunizations, information on the Vaccines for Children program and state immunization registry enrollment.
• Three months following the pre-test, a post-test was administered to assess the intervention.

FEEDBACK FROM OB-GYN PRACTICES ON THE INTERVENTION

• “ACOG’s endorsement adds validity and urgency to the CDC's immunization recommendations”
• “Increased awareness of vaccine safety in pregnancy”
• “The in-service fired up some employees to be sure Tdap and flu shots are offered to our pregnant patients and family members”
• “Made the staff more comfortable with adding vaccines”
• “Improved awareness and updated information on immunization schedules”

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