PROGRAM WORK STATEMENT

FY 2017 Social Service Contract funded by Travis County

Instructions:

- Answer the following questions as they pertain to only those programs and services in which Travis County invests.
- Ensure that all language (e.g. agency and program names, performance measures, etc.) is consistent across all contract forms.
- Do not delete any instructions or question descriptions.
- The information contained in this document will be used to report on your program to the Travis County Commissioners Court and the public, so the information herein should accurately explain and reflect the program and services.

1. Program Information

Provide agency name and program name as they appear on all contract documents.

Agency name: Austin/Travis County Health and Human Services Department

Program name: Immunizations

2. Program Goals

Briefly describe the goals of the services purchased by Travis County in this contract.

To improve immunization coverage levels and to prevent disease that is vaccine preventable in Travis County.

3. Target Population

Briefly describe the target population of this program.

<u>Clinical immunizations</u> are targeted to both children and adults and provided through City-purchased vaccines, Medicaid (DSRIP) funded vaccines and vaccines provided through the federally-funded Vaccines for Children (VFC). These populations include the following:

- Uninsured or underinsured children and adults
- Children covered by CHIP
- Children who are Native American or Native Alaskan heritage
- Children on Medicaid
- Populations identified at significant increased risk for vaccine preventable disease

4. Client Eligibility

List all eligibility requirements for clients to receive services in the program, and fully describe the criteria for each requirement (see Sample Table below for examples). If eligibility requirements vary by program component, please specify in the descriptions. If your contracted program includes multiple service components with varying eligibility criteria, you may copy/paste the table below, complete one table per component, and title each table accordingly.

Eligibility	Description of Criteria	Verification Method
Requirement		
Income level	At least one-half of clients must be at or below 100% FPIG. Remainder can be up to 200% FPIG.	Income level is self-declared based on HUD 24 th Code of Federal Regulations, part 5.
Residency	Clients must be residents of the five county	Residency verified by utility bill, lease or
	area: Travis, Williamson, Hayes, Bastrop,	rental agreement, or government-issued

Sample Table:

Caldwell photo identification	Caldwell.	photo identification.
	calamen.	photo achtification.

Program Component (if applicable):

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Eligibility Requirement	Description of Criteria	Verification Method				
Medicaid eligible, Uninsured, American Indian or Alaska Native, Underinsured, Underinsured children are eligible to receive VFC vaccine only through a Federally Qualified Health Center (FQHC), or Rural Health Clinic (RHC) or under an approved deputization agreement.	Vaccines for Child eligibility	Client self-reported				
Noted as High Risk	Determination that population is at increased risk due to behavior or environmental factors	Center for Disease Control (CDC), World Health Organization (WHO), or public health documented need				

(If program has additional eligibility requirements, insert additional rows in table. Please delete empty rows.)

5. Service Delivery

Describe the services and how they are provided through the program. This should be a clear and concise summary of how clients move from initial contact through exit and follow-up. Include all relevant components of the core services, such as:

- Outreach
- Intake
- Eligibility determination process
- Service provision
- Duration of services
- Termination or discharge
- Coordination with and referral to/from other agencies
- If applicable, brief description of research or promising practice on which program is based
- Any other relevant components of service delivery for this program

Shots for Tots/Big Shots:

- Provides two immunization clinics located within (and in close proximity to) high need/low income zip codes.
- Employs two nurses at one north location and one nurse at a south location.
- Capacity to serve approximately 15,000 clients annually (children and adults).
- Provides and/or translates over 10,000 shot records annually.
- Provides clinical outreach services to hard-to-reach and traditionally underserved populations.

Public Education and Awareness:

- Implements and/or supports over 15 community public health fairs and significant public health events annually to raise awareness.
- Collaborates with internal and community partners to raise awareness about the importance of immunizations and vaccine preventable diseases.

High Risk Adult Populations:

• The program provides on-site direct service to very high risk and high need client's county-wide seeking care in the HHSD STD clinics (DSRIP funded).

• In addition, the program's mobile clinic immunizes clients at elevated risk for vaccine preventable diseases through a series of collaborations with 17 social service organizations. Populations at targeted include: homeless, men who have sex with men, substance abusers, uninsured, undocumented laborers, non-English speaking.

Perinatal Hepatitis B Prevention:

- Provides specific harm reduction outreach to pregnant mothers at risk for transmitting Hepatitis B to their children.
- Provides an RN to case manage clients in addition to providing technical assistance and educational sessions to local hospitals for Travis County with an average case load of 75 clients per month.

Vaccines for Children:

- Vaccine ordering and inventory support for all VFC providers.
- HHSD currently provides technical support and trainings to approximately100 Travis County providers.
- The program provides special training and assistance to ensure proper storage and handling techniques to providers.
- Staff performs unannounced visits and auditing of VFC facilities to ensure CDC recommended storage and handling of vaccines.

Flu Clinics:

- The current budget for flu provides approximately 4000 doses of quadrivalent flu which is targeted to adults and children that experience multiple barriers to medical care and/or experience financial hardship.
- All flu doses purchased will be given through targeted flu clinics and/or distributed to our internal partner organizations serving the uninsured.
- Partner recipients agree that no one will be turned away based on inability to pay.

Information, referral, and appointment line:

- Program accepts between 16,000 18,000 calls annually for appointments, information, and referrals pertaining to immunizations in Travis County.
- The program has two full-time equivalents (FTEs) assigned to this function.

Texas Statewide Immunization Registry Support

• Provide quality assurance, data support and data entry activities to the ImmTrac electronic immunization system.

Population Assessment and Audits:

- Program meets state requirements by regularly auditing immunization records at private and public childcare centers and schools assigned annually by Texas Department of State Health Services (DSHS).
- Auditing and monitoring ensure that children receive their vaccinations; providing optimal protection for themselves and the community.
- The team reviews over 10,000 immunization records annually and provides a follow-up to each audited facility.
- The following summarizes coverage assessments or surveys conducted in Texas:
 - Texas child care immunization assessment
 - o Childcare audit

- o Annual report of immunization status
- School audit
- o Texas school immunization validation survey
- Texas county retrospective immunization school survey (TCRISS)

6. Service Accessibility

Describe any relevant strategies employed by the program to ensure service access related to the following issues:

- Cultural competence
- Language and communication access
- Geographical access
- Anti-discrimination strategies
- Other accessibility issues relevant to the program

Employees are provided access to a variety of cultural competent trainings offered the City of Austin Employee Assistance workforce development opportunities as well as attend all required annual trainings provided through the HHSD

Employees are provided language line accounts that permit for real-time translation services via a phone support calling center. In addition, all Vaccines Information Sheets are available and provided via the Centers for Disease Control. Clinic and screening information are made available in English, Spanish and most Asian language dialects.

Shots for Tots/Big Shots clinics are provided to the public at both a south and north location within Travis County. There are an additional 85 Vaccines for Children providers spread out across the Travis County also providing low/no cost services to children and adults. Special influenza clinics are provided in north, central and southern locales annually and target the uninsured populations.

Our adult vaccination for high-risk adults targets adults that are at elevated risk to vaccine preventable diseases due to behavior, environmental and/or an inability to gain access to immunization services. These include, but are not limited to populations that include: men-who-have-sex-with-men (MSM), homeless, and substance abusers.

7. Program Staffing

List the staff positions (titles only, no individual names) that are essential to this program, and provide a brief description of duties as they relate to this program. If there are multiple staff positions with the same title and duties, you can note the number of positions with the position title, e.g. "Case Manager (5)."

Position Title	Description of Duties		
HHS Program Supervisor	Supervises five FTEs over Vaccines for Children		
Patient Representative	Client intake and admin support (Shots for Tots – Big Shots)		
Supv, Reg Nurse PH	Supervisor for all Imm Clinics (Shots for Tots – Big Shots)		
Community Worker	Audit and compliance team support		
Public Health Educator I	Lead at media liaison and health educator for immunization unit		
Licensed Vocational Nurse	Client immunizations and services (Shots for Tots – Big Shots)		
System Support Technician A	Information and technologies support; TWICES application lead		
Administrative Assistant	Appointment line and admin support (Shots for Tots – Big Shots)		
Medical Regulatory Monitor	Lead for audit and compliance team support		
Patient Representative	ImmTrac Support		
Registered Nurse Senior	Hep B education and prevention		

	Call center and cashier staff and Medicaid billing staff; higher
Public Health Supervisor	education liaison
· · · ·	Monitor, train, educate and review 33% of Travis County VFC
Patient Representative	providers
	Monitor, train, educate and review 33% of Travis County VFC
Patient Representative	providers
	Monitor, train, educate and review 33% of Travis County VFC
Patient Representative	providers
Patient Representative	Immtrac promotion, education and support (VFC)
	collect fees, enter data, support billing, appt reminder (Shots for
Cashier	Tots and Big Shots)
	collect fees, enter data, support billing, appt reminder (Shots for
Cashier	Tots and Big Shots)
Administrative Assistant	Medicaid billing support, cashier backup, call center support
Licensed Vocational Nurse	Client immunizations and services (Shots for Tots and Big Shots)
Patient Representative	Client intake and admin support (Shots for Tots – Big Shots)
Unit Manager	Unit manager: lead staff, grant and contract compliance
	Collect fees, enter data, support billing, appt reminder (Shots for
Patient Representative	Tots and Big Shots)
Patient Representative	Medicaid lead
Admin Senior	Unit Administrative Lead
Admin Assistant	VFC Admin Lead
Licensed Vocational Nurse	Client immunizations and services (Shots for Tots and Big Shots)
Admin Assistant	SFT/BS clinical administrative Lead
Licensed Vocational Nurse	Client immunizations and services
Patient Representative	Client intake and admin support
Supv, Reg Nurse PH	Outreach Supervisor (DSRIP, Audits, Peri-Hep B)
RN Senior	Immunization services to high risk and vulnerable adults (DSRIP)
Patient Representative	Immunization services to high risk and vulnerable adults (DSRIP)
LVN	Immunization services to high risk and vulnerable adults (DSRIP)

(If program has additional staff positions, insert additional rows in table. Please delete empty rows.)

8. Program Evaluation

a) Information Management and Data Collection

- Describe the **tools and processes** used to collect program data, and the **systems** used to manage program data (i.e. client data, service information, or other data relevant to the program's overall service delivery and performance).
- If any surveys are used to collect information used in performance reporting, please provide a description of survey procedures (such as when, how, and by/to whom the survey is distributed, received, completed, and returned) and a copy of the most recent survey as an addendum.
- 1. The program actively queries clients, monitors, evaluates and reports annually a <u>customer</u> <u>service report</u> in the following areas (annual customer service report available upon request).
 - a. Shots for Tots and Big Shots clinics (phone reception, desk reception, nurse interaction, fee collection)
 - b. Vaccines for Children (feedback from VFC providers regarding technical support)
 - c. ImmTrac Outreach (feedback from VFC providers regarding technical support)
 - d. Health Education and outreach
 - e. Influenza mass clinics

- f. Childcare/school audits
- g. Travis County Immunization Collaboration
- h. Perinatal Hepatitis B outreach (direct service client feedback)
- i. Adults at high risk outreach (direct service client feedback)
- 2. The program actively samples and monitors data collection and data entry in all clinical interactions that include (data CQI reports available upon request):
 - a. Shots for Tots and Big Shots medical and client data
 - b. Adult high risk outreach medical data
- 3. The program actively self-audits and monitors fee collection procedures at clinic locations (fiscal reports available upon request).

b) <u>Performance Evaluation</u>

Describe how the agency uses the data it collects to evaluate both programmatic effectiveness (as described in questions 2 and 5 of this work statement) and progress towards performance goals (as described in 9 and 10 of this work statement).

Beyond the measures reported to Travis County monthly the program internally monitors the following measure outputs and outcomes (sample sheet below).

		Im	munization	Annual	Report Measures	
Target Metric		FY14	FY15	FY16	Data Source	Point of Contact
Billing/Finance	Office					
\$50k	Medicaid Collected	\$51,067	\$53,837		Manual Count	Hargrove
\$5k	Medicare Collected	\$7,557	\$5,931		Manual Count	Hargrove
\$1k	Flu Donations Collected	\$1,504	\$793		Manual Count	Hargrove
\$160k	Fee for Service Collected	\$178,184	\$165,884		Manual Count	Hargrove
95%	% of approved claims	95%	96.30%		Manual Count	Hargrove
15%	% of non-pay	16%	19%		Manual Count	Hargrove
Call Center						
16k	# of calls answered				Avaya Report	Hargrove
< 30 sec	Average wait time	24 seconds	29 seconds		Avaya Report	Hargrove
15k	# appointments booked	15,411	14,914		Manual Count	Hargrove
>95%	Overall Customer Service Score	99.40%	98.80%		Manual Count	Hargrove
Shots for Tots	/ Big Shots					
8k	# Children Vaccinated				TWICES	Cavin
3k	# Adults Vaccinated				TWICES	Cavin
22k	# Total Immunizations Given				TWICES	Cavin
	# Shot Records Screened				Manual Count	Cavin
>95%	Overall Customer Service Score	99.70%	99.70%		Manual Count	Hargrove

2 (1)					TAUCEC	Tuelon
3.6k	# Adults Vaccinated # Total Vaccinations				TWICES	Tucker
10k	# Total Vaccinations Given				TWICES	Tucker
IUK	# of collaborative				TWICLS	TUCKET
12	organizations				Manual	Tucker
12	Overall Customer				Widniddi	
>95%	Service Score				Manual	Tucker
Vaccines for Cl	hildren					
	# of Unannounced Site					
12	Visits	0	11		Manual Count	Crookham
	# of Vaccinations Given					
100000	by Providers	241,721	234,028		Manual Count	Crookham
	# of Children Served by					
85	Providers	96,688	93,611		Manual Count	Crookham
	# of Clinician					
12	Workshops Facilitated	2	6		Manual Count	Crookham
	Overall VFC Customer					
>95%	Service Score	100%	92%		Manual Count	Hargrove/Crookham
	# of ImmTrac Records					
1200	Brought Up-to-date				Manual Count	Monreal
> OF 0/	Overall Imm Trac				Manual Count	
>95%	Customer Service Score				Manual Count	Monreal/Crookham
Health Educati	ion / Promotion					
	# of health fair					
18	activities				Manual Count	Christian
10	# of social media				Manual Caust	Christian
10	activities				Manual Count	Christian
4	# of trainings				Manual Count	Christian
	Overall Customer					
>95%	Service Score	100%	100%		Manual Count	Hargrove/Christian
Immunization	Audits					
Assigned by	# of completed					
DSHS	surveys/audits				Manual Count	Tucker
Assigned by	# of Childcare-School					
DSHS	Rule Trainings				Manual Count	Tucker
	Overall Customer					
>95%	Service Score	100%	100%		Manual Count	Hargrove/Tucker
Peri B Case Management						
	% served within 60					
100%	days				Manual Count	
	Overall Customer					
>95%	Service Score	100%	100%		Manual Count	Hargrove/Tucker
Continous Quality Improvement						
	Overall Customer					
>95%	Service Rating	99.85%	99.75%		Manual Count	Hargrove
<5%	% of data entry errors				Manual Count	Christian/Hargrove

c) <u>Quality Improvement</u>

Describe how the agency uses its evaluation results to: identify problems or areas for improvement in service delivery; design strategies to address these problems; implement those strategies; and follow up to ensure corrective actions have been effective.

As noted

9. Output Performance Measures

Enter the output performance measures to be reported for the program in quarterly performance reports. You must report the number of unduplicated clients served and at least one other output. Total annual goals should be 12-month goals. Outputs should be reported quarterly unless a specific programmatic or data-driven limitation exists. Please use the comments section to specify and provide explanation for any reporting exceptions.

Output Measure	Total Annual Goal	Quarters Reported
1. Number of children immunized	8000	4
2. Number of adults immunized)	3000	4

(If approved for additional Output measures, insert additional rows in table. Please delete empty rows.)

Comments (for reporting exceptions, if applicable): *Children and adults vaccinated are intended to be vaccinated multiple times over time as necessary so client counts will be duplicated. We suggest "client visits" be utilized to track this measure.*

10. Outcome Performance Measures

Enter the outcome performance measures (numerators, denominators, and outcome rates) to be reported for the program in quarterly performance reports. Total annual goals should be 12-month goals. Outcomes should be reported quarterly unless a specific programmatic or data-driven limitation exists. Please use the comments section to specify and provide explanation for any reporting exceptions.

	Outcome Measure		Total Annual Goal	Quarters Reported
1.	Number of Perinatal Hep B clients who receive follow-up education within 60 days of referral - completed	(numerator)	TBD	
	Number of Perinatal Hep B clients who receive follow-up education within 60 days of referral - assigned	(denominator)	TBD	4
	Percent of Perinatal Hep B clients who receive follow-up education within 60 days of referral	(rate)	100%	

(If approved for additional outcome measures, insert additional rows in table. Please delete empty rows.)

Comments (for reporting exceptions, if applicable):

11. Community Planning

a) <u>Community Planning Group Participation</u>

If the agency participates in any community planning groups relevant to the issue area and services under this contract, please list them here, along with the name and title of agency representatives who participate and a brief description of their role and participation in that planning group.

Community Planning Group	Agency Participant Name/Title	Participation Role/Description
Travis County Immunization	Facilitate workgroup sessions as	Locally we communicate with
Collaboration Group	needed; provide critical	partners pertaining to influenza
	communications to partners as	clinics and back-to-school
	needed; assist in coordination of	operations and plans; statewide
	Texas Statewide Immunization	we assist and support the Texas
	meetings as needed and	Immunization Statewide
	requested.	Workgroup with their annual
		meetings which provide
		legislation updates

(If agency is involved in additional planning groups, insert additional rows in table. Please delete empty rows.)

b) Community Plan

If the agency aligns itself with a Community Plan, provide the name of the plan and its authoring body, and a brief description of how you align your agency with and respond to the plan's shared community goals. If there is not an established community plan in this issue area, describe what the agency uses to orient itself to community needs and goals.

N/A

c) <u>Response to Community Change</u>

Have there been, or do you anticipate, any changes to the community plan or community goals, that will impact how you provide services over the remainder of your contract period?

<u>Clinical Services</u>: We expect to continue to serve between 7,000 and 8,000 children annually for vaccinations the Shots for Tots clinics. Approximately 35% of our children are Medicaid recipients, however, due to the lack of Medicaid appointments available in Travis County, we continue to fill that need in the community. We continue to be prepared to respond to clinic closures, new vaccine requirements and to support the school districts in providing immunizations necessary prior to each school year.

In addition, we expect to continue to serve approximately 2,500 to 3,000 adults annually in the Big Shots clinics for as long as adult safety net vaccines continue to be provided through the DSHS. Adults in Texas lack access to Medicaid and Travis County currently experiences approximately a 20% uninsured rate. Vaccinations to those populations as well as our continued efforts into the hard-to-reach and vulnerable high risk adults will continue to see a need for services and continue as the most effective disease prevention intervention with the highest and cost avoidance savings to the community.