



State of Missouri 2010 Governor's Award for Quality and Productivity Executive Summary

Team Name: H1N1 Mass Vaccination Team

Nominator: Scott Clardy

Nominating Department: Missouri Department of Health and Senior Services

Category: EFFICIENCY/PROCESS IMPROVEMENT

Executive Summary:

This team has demonstrated an exemplary effort over a period of time, beginning in the summer of 2009 through the present. This team came together to assure a coordinated statewide H1N1 vaccination effort. Efforts began by meeting with external stakeholders to develop a vaccine dissemination plan. This included working very closely with the local public health agencies (LPHAs). By August 18, 2009, the team had developed a comprehensive LPHA guidance document on the distribution of H1N1 vaccine in Missouri. This document included information on vaccine production, vaccine allocation, prioritization of citizens for vaccination, distribution of vaccine from the federal government, vaccine distribution at the local level, tracking of vaccine adverse events, reporting of vaccines administered, legal issues, administration fees, pharmacy licensure, etc.

Vaccine started becoming available to Missouri in October, 2009. The team used a sophisticated algorithm to allocate vaccine to LPHA's based on their proportion of highest priority populations. The team developed documents for LPHA's and healthcare providers to assure the appropriate presentations were being administered to the appropriate patients.

The team developed an online system for ordering vaccine and for reporting of doses administered. This made the ordering of vaccine much more efficient and greatly decreased the potential for human error. However, all vaccine orders were still checked and double-checked each day to assure the accuracy of vaccine orders.

The team also began using webinar technology to communicate with all LPHA's simultaneously. Weekly webinars were held to inform LPHA's of new developments in the vaccine distribution system, provide updates on allocations, take polls of LPHA's on certain issues, and answer questions from LPHA's. The team has received high praises from LPHA's for using this communication system. DHSS is now using webinar technology for other issues also.

To this point, the efforts of the team have resulted in more than 1.6 million doses of H1N1 vaccine being shipped throughout Missouri. Hundreds of thousands of Missourians have been vaccinated against H1N1.

In summary, the work of this team represents an extraordinary and unprecedented public health response over a period of months resulting in Missourians being better protected against H1N1 infection. In addition, the work of this team has built a much stronger working relationship between DHSS and the LPHAs, leading to a more robust public health system in Missouri.



State of Missouri
2010 Governor's Award for Quality and Productivity

NOMINATION FORM

GENERAL INFORMATION

Department: Missouri Department of Health and Senior Services (DHSS)

1. Project or team name.

H1N1 Mass Vaccination Team

2. List the name of all team members, job titles, state agency department, and/or community organization. [please list alphabetically by last name]

Adams, Dexter, Project Specialist, Bureau of Immunization Assessment and Assurance (BIAA)
Anderson, Jo, Program Coordinator, Center for Local Public Health Services (CLPHS)
Bonchonsky, Debbie, Health Program Representative II, H1N1 Ordering Lead, BIAA
Branson, Eric, Health Program Representative II, Counter Measure Response Administrator, BIAA
Brooks, Debra, Project Specialist, BIAA
Campbell, Kristi, Deputy Section Administrator, Section for Disease Control and Environmental Epidemiology
Clardy, Scott, Section Administrator, Section for Disease Control and Environmental Epidemiology
Cole, Marjorie, Public Health Nurse Consultant, Bureau of Genetics and Healthy Childhood
Hamm, Robert M.D. Medical Consultant, Center for Emergency Response and Terrorism (CERT)
Heisler, Sue, Public Health Manager, Strategic National Stockpile Coordinator, CERT
Hoffman, Nancy, Project Specialist, Section for Disease Control and Environmental Epidemiology
Hollis, Katie, Senior Office Support Assistant, BIAA
Kneeskern, Susan, Public Health Consultant Nurse, BIAA
Lock, Anne, Director, CLPHS
Logston, Edythe, American Reinvestment and Recovery Act Specialist, BIAA
Nash, Betty, Public Health Manager, Center for Health Policy Integration
Nash, Mike, Project Specialist, BIAA
Norman, Bryan, Planner III, CERT
Parvin, Gregg, Senior Epidemiology Specialist, Registry Manager, Data Manager, BIAA
Pherigo, Elaine, Health Program Representative II, Vaccine Manager, BIAA
Powell, Linda, Health Program Representative III, H1N1 Vaccine Coordinator, BIAA
Quinn, Brian, Public Information Admin., CERT
Reidhead, Mat, Economist, Director's Office
Ruth, Jeannie, Public Health Manager, Bureau Chief, BIAA
Shewmaker, Shawna, Admin. Office Support Assistant, Sect. for Disease Control and Environ. Epidemiology
Sims-Higgins, Charlotte, Planner III, Vaccines for Children Coordinator, BIAA
Strope, Amiee, Administrative Office Support Assistant, BIAA
Wagar, Kit, Director, Office of Public Information, Office of Public Information
Winslow, Aaron, Emergency Response Coordinator, CERT

3. Describe the project (200 words or less)

This team coordinated the statewide H1N1 vaccination effort. Stakeholders collaborated to develop a vaccine dissemination plan. This included working closely with Missouri's 115 local public health agencies (LPHAs). By August 2009, an LPHA guidance document on distribution of H1N1 vaccine in Missouri was developed. This document included information on vaccine production, allocation, prioritization of citizens for vaccination, distribution from the federal government, distribution at the local level, adverse events tracking, vaccines administered reports, legal issues, administration fees, pharmacy licensure, etc.

Vaccine became available Missouri in October, 2009. A sophisticated algorithm was used to allocate vaccine to LPHAs based on the proportion of highest priority populations. As more vaccine became available, it was adjusted to include priority populations. When vaccine became available to vaccinate all of the priority populations, allocation was made pro rata. Complications were: multiple vaccine presentations and the limitation on who could be administered certain presentations based on age, pre-existing conditions, etc. The team developed documents for LPHAs and healthcare providers to assure the appropriate presentations were being administered.

An online vaccine ordering and dose reporting system was developed, which made the vaccine ordering efficient. Vaccine orders were double-checked each day to assure LPHAs received their allocated vaccine.

4. Nomination category.

(Check only one)

☐ INNOVATION

☐ CUSTOMER SERVICE

☒ EFFICIENCY/PROCESS IMPROVEMENT ☐ TECHNOLOGY IN GOVERNMENT

5. Describe why you selected this nomination category.

Indeed, all of these categories could have been checked due to the myriad of activities associated with the event.

Efficiency/Process Improvement was decided upon. Since the H1N1 pandemic was a never-before-experienced event, all levels of government were involved in making daily decisions about management of the pandemic. The processes were built on a day-to-day basis based on the information available at the time. Online vaccine ordering led to a more efficient and streamlined process for ordering and tracking orders. Finally, weekly webinars were held with LPHAs to more efficiently provide updated information on vaccine processes and to address barriers more effectively.

Innovation could have been checked, because of the creative ways in which the existing Vaccines for Children processes were modified to accommodate the high provider demand. Also, many providers were involved in provision of the vaccine that had never participated before.

Customer Service could have been checked because of the tremendous assistance the department provided to more than 700 H1N1 vaccine providers (physicians, nurses, hospitals, etc.). Many letters of thanks and high commendations from these providers have been received by the team. A unique email address and toll-free phone number were set up specifically to answer questions about H1N1 vaccine availability, doses, side effects, etc.

Technology in Government could have been checked because the Countermeasure Response Administration requirement was built into a web-based module, providing for ease of reporting and ordering of vaccine, which did not exist before.

II. BACKGROUND

When did the team begin?

Summer 2009 (June)

2. When did the team implement this project?

August 2009

3. How long has the project been implemented?

☐ 0 - 3 Months

☐ 4 - 6 Months

☐ 7 - 9 Months

☒ 10 - 12 Months

☐ 12 or more

☐ On-going Project

III. RESULTS/ACCOMPLISHMENT

1. What did the team accomplish? (150 words or less)

Developed a comprehensive LPHA guidance document on distribution of vaccine.

Implemented a sophisticated algorithm to allocate vaccine to areas with the proportion of highest priority populations.

Developed documents for healthcare providers to assure the appropriate vaccine presentations were being administered to the appropriate patients.

Developed an online ordering and reporting system to track vaccine orders and doses administered.

Held weekly webinars to inform LPHAs of new developments in the vaccine distribution system, provide updates on allocations, take polls of LPHAs on certain issues, and answer questions from LPHAs.

To this point, the efforts of the team have resulted in more than 1.6 million doses of H1N1 vaccine being shipped throughout Missouri. Hundreds of thousands of Missourians have been vaccinated against H1N1.

Instilled a much stronger working relationship between DHSS and the LPHAs, leading to a stronger public health system in Missouri.

2. Which of the following describes the benefits of the accomplishment? (Check all that apply and provide an explanation)

☐ cost reduction

☐ time savings

☒ improved process

☒ other: describe Interagency collaboration enhanced

3. Explain how the accomplishments of the team are beyond regular duties and responsibilities (150 words or less).

The nature of the H1N1 pandemic caused everyone involved to stretch beyond current expectations. The effort necessary to receive and distribute such a large volume of vaccine in a period of a few months is unprecedented. This effort challenged Missouri's public health system, resulting in innovative systems thinking, very quick development of a more efficient vaccine ordering and tracking process, and use of newer technology for efficient information dissemination. The department took ownership of the emergency and responded to guidance from the Centers for Disease Control and Prevention, expectations of state government officials, LPHAs, the public, and other stakeholders.

The H1N1 order and shipment volume of 1,630,000 doses represented a two-thirds increase in the work load for the vaccine ordering staff while at the same time processing all non-H1N1 orders. No new permanent DHSS staff was added for this public health event. Current staff members invested many hours of overtime.

IV. MEASUREMENT/EVALUATION

1. **Describe how the success of the project was measured and what outcomes were achieved.**
(description should not exceed 300-500 words)

Success is measured in three broad categories: Relationships built; Missourians served; Processes (both IT related and other) established

Relationships built: A total of 557 providers (physicians, clinics, local public health agencies, etc.) received vaccine for distribution. However, contact was made with a total of 743 potential H1N1 providers even though not all received vaccine for distribution and/or administration.

Missourians served: 1,630,000 doses of vaccine were ordered and then shipped to Missouri's providers for distribution.

Processes established: Enhanced web-based ordering, tracking, and reporting systems were established. A total of 5,618 H1N1 orders were processed with a daily maximum of 453 orders processed on 11/10/2009. The maximum order volume per day was 120,000 doses on 12/09/2009. There were four days where over 100,000 doses were ordered, 10 days with over 50,000 doses ordered and 20 days with over 25,000 doses ordered. The H1N1 order and shipment volume of 1,630,000 doses represented a two-thirds increase in the work load for the vaccine ordering staff of DHSS while at the same time processing all non-H1N1 orders. No new permanent staff was added for this public health event in DHSS.


2. **Are the benefits derived from this project:** (Check only one.)

☒ Recurring ☐ One-time

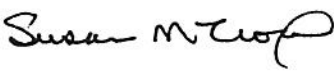
V. RECOGNITION/AWARDS

1. **Has this project ever been nominated for the Governor's Award for Quality and Productivity?**
If yes, when?
No
2. **If yes, for which category was it nominated?**
N/A
3. **Has this project received any other awards or recognition in the past? If yes, describe.**
No

VI. NOMINATOR'S INFORMATION

NOMINATING DEPARTMENT			
Missouri Department of Health and Senior Services			
Name	Signature	Telephone Number	E-Mail Address
Scott Clardy		(573) 751-6141	scott.clardy@dhss.mo.gov

VII. DEPARTMENT COORDINATOR INFORMATION**DEPARTMENT****Missouri Department of Health and Senior Services**

Name	Signature	Telephone Number	E-Mail Address
Susan M. Troxel		573/751-6059	<u>Susan.Troxel@dhss.mo.gov</u>

VIII. DEPARTMENT DIRECTOR APPROVAL**DEPARTMENT DIRECTOR'S NAME**

Margaret T. Donnelly

DEPARTMENT DIRECTOR'S SIGNATURE*

Nomination must be signed ONLY by the Department Director to be eligible for consideration.

Nominations not signed by the Department Director will be returned.