



How Do You Rate?

Information about the Assessment, Feedback, Incentives and Exchange (AFIX) Project

Help Ohio achieve its goal to have 90 percent of all 2-year-olds appropriately immunized.

According to the Centers for Disease Control and Prevention (CDC), National Immunization Survey (NIS) data from 2008, 81.8 percent* of Ohio's children are immunized adequately by 24 months of age with 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B and 1 Varicella (Morbidity and Mortality Weekly Report (MMWR), August 28, 2009 Vol. 58, No. 33).

The Ohio Department of Health's Immunization Program and participating local health districts provide an effective, confidential program for providers to determine and improve the immunization rates of their 2-year-olds. The program is titled Assessment, Feedback, Incentives and Exchange (AFIX). The assessment offers a review of a sample of children's immunization records to determine practice immunization coverage levels and identifies procedures associated with low immunization rates. Feedback is provided to the practice concerning vaccine delivery practices. The feedback session provides a valuable opportunity for a practice to discuss and prioritize quality improvement activities related to immunizations with the assistance of an immunization representative from the state or local health district.

What is AFIX?

AFIX is an acronym for a set of strategies designed to improve immunization rates when implemented.

- Assessment of immunization coverage levels
- Feedback of information to providers and staff
- Incentives to recognize and reward outstanding and improved performance
- Exchange of information on best practices

When physicians in Georgia implemented the AFIX strategies, they increased their rates in the public clinics by 49 percent between 1986 and 1994. In addition, assessments in private practice clinics and managed care provider settings in Arizona, Massachusetts, New York and Washington suggest this strategy improves rates in these settings as well.

Why assess immunization rates?

A national goal was established to have 90 percent of all 2-year-olds up-to-date on their immunizations. The National 2008 immunization rate for 4 DTaP, 3 Polio, 1 MMR, 3 Hib, 3 Hepatitis B and 1 Varicella is 76.1 percent.* Ohio's rate is 81.8 percent.* Do you know what your practice's current immunization coverage rate is?

*For the purpose of the AFIX Project for Ohio, the NIS data of up-to-date by 24 months are used for comparison because the CoCASA program calculates up-to-date rates by 24 months. NIS also provides data for up-to-date by 19–35 months which may show higher rates for state and/or national rates.



AFIX Project for Ohio • Ohio Department of Health • Immunization Program

Why are assessment and feedback important?

Routine assessment and feedback of immunization coverage levels for individual providers or provider sites is one of the most effective strategies for achieving high, sustainable immunization coverage (MMWR, March 15, 1996 Vol. 45, No.10). The Task Force on Community Prevention Services continues to recommend assessment and feedback based on strong evidence of effectiveness found through a recent and comprehensive literature review on assessment and feedback (AFIX) for immunizations. (<http://www.thecommunityguide.org/vaccines/universally/RRproviderassessment.html>)

What software is used for the assessment?

- . Comprehensive Clinic Assessment Software Application (CoCASA)
- . Developed and maintained by CDC
- . Provides early indicators for the presence of significant barriers to immunization
- . Produces reports that provide the practice with information about the vaccination status during the critical primary series period

What does a record assessment and feedback session involve?

Your practice provides the AFIX staff with a list of 24 thru 35-month-old children in your practice. The AFIX staff will select a random sample of charts to be pulled by either your staff or the AFIX staff. Immunization data from each child's chart in this sample are entered into a computer using the CoCASA software. After all data are entered, reports are generated for the feedback session that include the vaccination coverage level, missed opportunities for simultaneous administration, information about children who started their immunizations late, drop-off rate and a list of children who are missing immunizations. During the feedback session, the reports will be reviewed with the provider and staff. Ideas and strategies will be discussed at the session, which could help the practice improve immunization practices and ultimately increase immunization coverage in their pediatric patients.

How much of my staff's time will an AFIX take?

AFIX staff have been specially trained to perform the assessments and provide feedback consultation. Involvement by your staff is limited to generating a list of patients within the birth date range given to you by the AFIX staff, pulling charts prior to the assessment (unless done by the AFIX staff) and participation in a feedback session which usually lasts about one hour.

What about patient confidentiality?

Patient confidentiality is a priority and will be maintained at all times. Unless specifically requested by the practice, the only data to be collected from patient charts will be the patient name, date of birth, immunization history and history of any vaccine-preventable diseases. None of this information will be entered in an immunization registry. The patient data collected during the assessment, which is entered into CoCASA, will be destroyed by June 30 of the year following the year of the assessment. References to any patient-specific information will be kept to the minimum information necessary to provide the feedback.

Help Ohio achieve its goal to have 90 percent of all 2-year-olds appropriately immunized.

For more information or to request an AFIX visit, contact the Ohio Department of Health's Immunization Program at (614) 466-4643 or (800) 282-0546 or contact your local health district.



AFIX Project for Ohio • Ohio Department of Health • Immunization Program

Revised 1/2010