

## VFC-enrolled Practice Satisfaction Program Evaluation

Given the strong reliance on the medical home in Vermont, the Immunization Program recognizes that high provider participation in the VFC program is essential to maintaining high childhood vaccination rates. This past January, Vermont Immunization Program staff worked collaboratively with MPH students from Harvard School of Public Health to design a plan to evaluate VFC-enrolled practices' levels of satisfaction with the Vermont Immunization Program. The work was facilitated through our participation in a program jointly run by the Centers for Disease Control and Prevention (CDC) and Harvard T.H. Chan School of Public Health.

This summer, Title V Maternal and Child Health Interns from Drexel University Dornsife School of Public Health and Johns Hopkins Bloomberg School of Public Health joined us to conduct the evaluation. They used a mixed-methods approach, combining a web-based quantitative survey with qualitative phone interviews to assess provider and vaccine coordinator satisfaction with the Program.

Thirty-four percent (96 of 283) of providers and vaccine coordinators responded to the web-based survey and 31 providers and vaccine coordinators were interviewed. Respondents represented practices from all local health districts.

Respondents noted satisfaction with all components of the Immunization Program and the Immunization Registry, while offering valuable insight into improving program components. Ninety-six percent of respondents to the web-based survey were satisfied or very satisfied with the Immunization Program and 87% were satisfied or very satisfied with the Registry. Particular strengths were the responsiveness of Program staff and timely communication about new vaccines and recommendations.

Challenges described included difficulty with transferring vaccines, predicting the practice's vaccine needs, and implementing AFIX quality improvement practices while managing multiple roles and administrative requirements. Some practices also had difficulty transferring data to the Immunization registry via their electronic health record system and many were not fully confident that the Registry accurately reflected their practice's immunization rate data.

Following the collection and analysis of the data, integration of quantitative and qualitative findings led to recommendations for program improvement. These recommendations include improving information technology aspects of both the Program website and the Immunization Registry, expanding continuing education on vaccine hesitancy, increasing utilization of the new user guides for the vaccine ordering system (VIMS), and helping to support practices' efforts to conduct targeted immunization projects or set up school-based clinics.

Thank you to all the practices that participated in the survey, interview, or both!