PROJECT CHARTER

OREGON'S 2012-13 ADULT IMMUNIZATION SPECIAL PROJECT

START DATE	July 2, 2012	**END DATE**	August 30, 2013
PROJECT SPONSOR	Centers for Disease Control and Prevention, National Center for Immunizations and Respiratory Diseases (CDC/NCIRD)		
PROJECT MANAGERS	Lorraine Duncan, Carlos Quintanilla – Oregon Immunization Program (OIP)		
PROJECT COORDINATOR	Kathy Scott, KD Scott Consulting, LLC		
KEY STAKEHOLDERS	Participating local health departments (LHDs) in Oregon		
PURPOSE	To strengthen Oregon's adult immunization infrastructure		

SCOPE

OIP will award funds to LHDs to carry out activities that address the grant's objectives (see below). LHDs will partner with pharmacies, large non-healthcare employers, community health centers, healthcare institutions, and long-term care facilities to increase influenza and Tdap vaccination rates. LHDs will report their activities and expenditures monthly to the OIP project coordinator. The project coordinator will provide technical assistance to LHDs by phone and in-person, and oversee local and state reporting and evaluation activities. The project coordinator will also produce six-month progress and final project reports, both of which will include state and local summaries.

NOT IN SCOPE	Project funds may not be used to purchase vaccine

OBJECTIVES

LHDs will:

- Establish partnerships with pharmacies to initiate or increase influenza and/or Tdap adult immunization by 10% or more
- Develop or improve relationships with non-healthcare employers with at least 50 employees with the goal of each employer offering at least one employee influenza and/or Tdap adult vaccination program
- Work with community health centers in their county to expand adult influenza and/or Tdap immunization services
- Work with healthcare institutions to improve healthcare worker influenza vaccination rates with a goal of increasing coverage by 10%
- Work with long term care (LTC) facilities to increase employee influenza vaccinations by 10%.

KEY OUTCOME MEASURES

LHDs are responsible for submitting information to OIP about the:

- Type and number of pharmacies, non-healthcare employers, community health centers, healthcare institutions and long-term care facilities engaged in the project
- Type and number of vaccination activities and events held by/with pharmacies, non-healthcare employers, community health centers, healthcare institutions and long-term care facilities
- Demographic characteristics of community health center patient populations

KEY OUTCOME MEASURES continued

OIP is responsible for:

- Determining baseline and change in adult influenza and/or Tdap rates, as appropriate, for pharmacies, community health centers, healthcare institutions and long-term care facilities
- Analyzing and interpreting local data for a six-month progress report and a final report

DELIVERABLES & MILESTONES FOR OIP AND LHDs

LHDs:

- Participation in initial site visit with project coordinator, completed by 9/14/12
- Approval of LHD evaluation plan developed at initial site visit, due by 9/14/12
- Monthly activities and expenditure reports to OIP, dates TBD

OIP:

- Project evaluation plan, due 7/31/12
- Initial site visits with participating LHDs by project coordinator, completed by 9/14/12
- Meeting minutes from monthly OIP/LHD conference calls, dates to be determined (TBD)
- Monthly activities and expenditure reports submitted to the CDC, 2nd Friday of the month
- Meeting notes from CDC reverse site visit by project coordinator, date TBD
- Six-month progress report, including state and individual LHD summaries, due 2/15/13
- Final project report, including state and individual LHD summaries, due 8/30/13

CONSTRAINTS

- Late start to project
- Limited LHD staffing
- Approval at corporate level for local pharmacy activities
- Resistance by some hospitals to using ALERT IIS for healthcare workers
- Some resistance to vaccinations by healthcare workers and the general public
- Perceived competition with pharmacies for vaccine revenue by some small rural LHDs
- Hospital and long-term care facility data provided in aggregate

ASSUMPTIONS

- Funding will not be interrupted

RISKS

- Layoffs of personnel (low)
- Shortage of influenza or Tdap vaccine (low)
- Possibility of influenza pandemic that sidelines project activities (low)

COMMUNICATION

- Information will be shared through the project's listserv: http://listsmart.osl.state.or.us/mailman/listinfo/oip_adult_imm_project
- Documents will be posted on the project's webpage at: https://public.health.oregon.gov/PreventionWellness/VaccinesImmunization/Pages/SpecProj.aspx

TOTAL BUDGET	BUDGET DETAILS
$1.8 million to OIP	LHDs receive base of $20,000 plus per capita funds