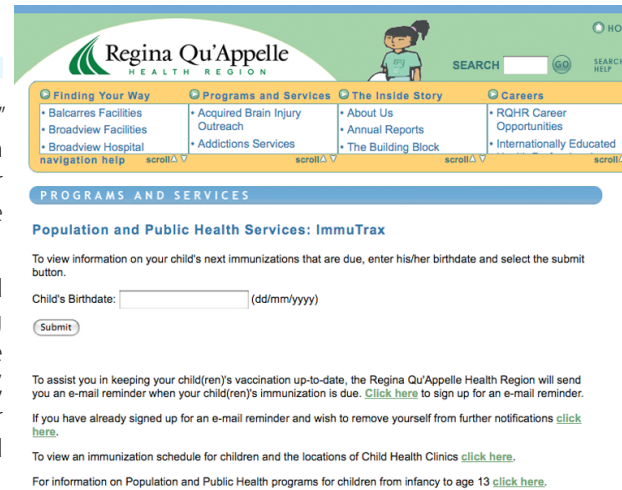


Linking with Parents

Regina Qu'Appelle Health Region in Regina, Saskatchewan has been busy "linking" with parents in their region through a redesigned website. The website has an interactive immunization tracker that will allow parents to receive an e-mail reminder 2 weeks before their child is due for immunization. The aim is to improve on-time immunizations in the health region.

The new website is also "tailored" to provide parents with a listing of programs and services that would be of interest to them based on the age of their children. "Training of our staff is the next step once we are happy with the product. In the meantime we will start planning for the public awareness campaign to be implemented in the fall", explained Dr. Tania Diener, Medical Health Officer for the region. Dr Diener and her project team will also be busy planning the evaluation of the web-based project and results are expected in December 2008. Visit this link to learn more about this project:

http://www.rqhealth.ca/programs/comm_hlth_services/pubhealth/childhood_immun.shtml



Northern Outreach

The Northwest Territories (NWT) is a geographically vast region which makes implementing continuing health education programs for immunization providers a challenge. This challenge was overcome in April this year with a Partnering for Protection grant-supported education event entitled *The Practicalities of Immunization*. Over 40 health care providers from all over the region gathered to learn more about basic immunology and how vaccines work; the epidemiology of Pneumococcal Disease in the NWT, Canada, and Circumpolar World; and preventative strategies to reduce occupational health risks related to providing immunization programs.

Wanda White, Communicable Disease Specialist with NWT Health and Social Services indicated the "evaluations from the education day were positive". A lively game of Vaccine Jeopardy injected a bit of fun into the learning.

Northern Health in Prince George, British Columbia is in the process of wrapping up a comprehensive immunization program review. Parents, public health nurses and physicians have been surveyed under this research program. Early findings indicate that the top three barriers to immunization for parents are long wait times for appointments, conflicting information about vaccine safety, and



inconvenient clinic schedules. The survey of public health nurses also reiterated these program challenges described by parents. Physician survey findings will be completed soon, however initial suggestions for program improvements will focus on new delivery methods and outreach locations, more staffing, improved clinic organization, more immunization promotion, and professional development.

Need more information on these projects?

Ask your Wyeth Public Health Educator about these projects or visit the Canadian Public Health Association's CCIAP website for more information about the grant program. The direct link is www.immunize.cpha.ca/english/hcprovd/grantse/ppgrante.htm

References:

- ¹ National Advisory Committee on Immunization. (2006). *Canadian Immunization Guide, 7th Ed.* Public Health Agency of Canada. ON: Ottawa.
- ² Sadoway, Plain and Soskolne (1990). Infant and preschool immunization delivery in Alberta and Ontario: a partial cost-minimization analysis. *Canadian Journal of Public Health*, 81, 146-151.
- ³ Ontario Ministry of Health and Long-Term Care. Day Nurseries Act (1990).

The content of this newsletter is based on proposals and unpublished reports submitted to Wyeth by Partnering for Protection grant recipients and have been verified by each grant recipient.



Wyeth's Partnering for Protection Grant Program:

Reaching Out in All Directions

What's Inside:

Reaching Out to New Moms

Working With Physicians to Improve Immunization Rates

More Research on the Horizon

Targeting Day Cares to Ensure Early Protection

Linking with Parents

Northern Outreach



Wyeth believes that a partnership approach will help strengthen the ability to implement education and research programs and achieve routine childhood immunization coverage goals. As part of the Partnering for Protection Grant Program, Wyeth supports activities and programs aimed at creating new approaches to understand and/or improve routine pneumococcal childhood immunization coverage rates in Canada. For more information about this grant program, please contact your local Wyeth Public Health Educator.

Reaching Out to New Moms

Traditionally, public health programs have implemented broad support strategies for post partum mothers as they adjust to life with a newborn baby. Post partum phone calling and home visiting are typical methods used. Concerns like breastfeeding, maternal fatigue and newborn care are often front and centre during these interactions. Recognizing that immunization schedules have become more complicated over the last few years and that new parents suffer from "information overload" after the birth of their child, Calgary Health, Alberta has explored a more focused approach to immunization education and the results have been positive.

Under this program, Calgary Health has aimed to improve "on time" immunization rates and reduce delayed immunizations in their region. After an initial public health visit to families with one to three day old babies, a follow-up telephone contact is then made at 6 weeks post partum by an immunization nurse to discuss immunization schedules and any questions or concerns. The call also serves as a reminder to book an immunization visit.

Working With Physicians to Improve Immunization Rates

In any discipline, a team approach is often the best way to achieve success. Two Partnering for Protection grant projects have adopted this philosophy and are working closely with physicians in their regions to achieve better pediatric immunization rates.

The Agence de la Santé et des services sociaux de la Capitale-Nationale in association with the Centre de Recherche du CHUL (CHUQ) are working with 10 medical clinics who administer the most vaccinations in Quebec City. During the spring of 2008, vaccination delays at each clinic were assessed for Prevnar®, Pentacel® and Meningitec® and personalized feedback was provided to doctors, nurses and secretaries regarding the findings. The effectiveness of this evidence-based approach on reducing late vaccinations will be measured in spring 2009 when the research team will assess again delayed immunizations for the three vaccines under study. Dr. Chantal Sauvageau, Médecin-conseil et chercheure, has observed that this "tailored" approach appears to be having a positive influence. "At the feedback sessions, many clinics already began discussing potential organizational changes that could be made to improve immunization practice at the clinic".

More Research on the Horizon

Look forward to learning more about Atlantic Health Sciences Corporation's gap analysis on pediatric immunization in South Western New Brunswick. A survey tool is currently under development and will be administered to 1200 parents of children who attend immunization clinics in the region. The survey will clarify reasons for "no shows" and cancellations at clinics and will guide strategies aimed at "filling in the gaps". Expect findings in March 2009.

The University of Ottawa will be busy over the summer coordinating a research project to be launched in the fall of this year. Under this initiative of the Loyer Da Silva Research Chair in Public Health Nursing an information tool kit will be created for use by new

Pat Brooks, Public Health Manager, Rural-Bow Corridor explained that "2150 post partum families were contacted over a one year period and approximately 64% of parents indicated that they will have their child vaccinated as per Alberta Health and Wellness recommended times."

Ms. Brooks further described that, as a result of this project, "the region has consistently maintained zero children needing follow-up at the three month surveillance point. We have almost reached 100% uptake on time". The project team sees this approach as an inexpensive and efficient process to increase uptake rates. Nurses find it takes far less time to be proactive compared to creating recall contact lists. Parents appear to be pleased with the timing of the contact and are ready to "hear the immunization message".

Further analysis and a final research report will compare costs and immunization rates achieved with this new process versus the approach taken in previous years.

As part of their Partnering for Protection grant project, staff from Windsor-Essex County Health Unit in Ontario visit physician's offices. Over 120 physician's offices are expected to participate in personal interviews, self reporting surveys and visual fridge inspections over the coming months. Line Lauzon, Manager of Infectious Disease Control and her team will use the survey and inspections to evaluate adherence to cold chain maintenance and the Ontario immunization schedule. Attitudes, beliefs and practice regarding simultaneous injections will also be explored.

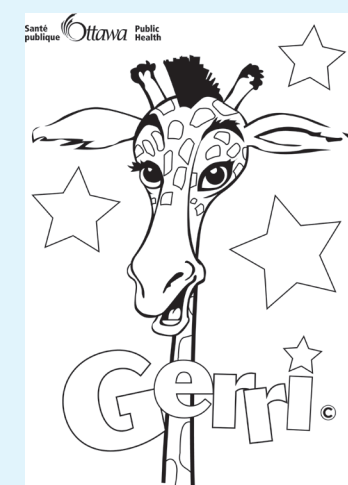
An online training module will also be developed to address learning needs in the area of cold chain maintenance and giving simultaneous injections. The module will be shared with the participating offices in the fall of 2008. Follow-up surveys and inspections will be conducted in late 2009 to determine training effectiveness and improvements to cold chain and immunization schedule adherence.

Canadians and immigrant families across Canada. The tool will be focus tested with 80 to 100 families who have children 0 to 4 years. The content of the information kit will be informed by focus groups, and the perceived usefulness and comprehension of the tool will later be evaluated using the same focus groups. The effectiveness of the tool in relation to immunization rates will be measured by assessing immunization records at six and nine month intervals. The project will be completed by December 2009. Without a doubt, the information kit and study findings will be much anticipated from all health care providers who deal with English-as a-second language challenges in their routine immunization practice.

Targeting Day Cares to Ensure Early Protection

Vaccination of young children enrolled in day care facilities is of particular importance given that such children are the most vulnerable to vaccine-preventable diseases (due to their age and contact with other children), and the primary immunization series is recommended between two and 18 months of age.^{1,2}

In Ontario, the Day Nurseries Act (DNA) of 1990 is a public health measure designed to increase the uptake of immunizations among this vulnerable population.³ Under the DNA, all children attending licensed day cares in the province must be immunized as recommended by the local Medical Officer of Health. In order to ensure compliance with the DNA, the Brant County Health Unit (BCHU) assesses immunization records of children enrolled in licensed day cares in Brant County on a monthly basis and issues suspension orders to parents of children who are missing vaccines. Children are suspended from the day care if they do not submit documentation for immunity against the required vaccines, a statement of conscience or religious belief, or a medical exemption form within 60 days of receiving the suspension order.



Another "colorful" way of working with day cares was developed by Ottawa Public Health and involved their well known mascot, Gerri the Giraffe. The health department publicized a grant-sponsored coloring contest through local newspapers and local day care centres. Over 50 day cares participated and approximately 800 children submitted entries for the contest. Prizes were awarded to winners in various age groups during Immunization Awareness week in April of this

year. As part of the contest entry form, parents were provided a provincial immunization schedule and were encouraged to contact the health department to update their children's immunization record.

Dawn Grakist, Immunization Program Supervisor explained that "records for 758 children who entered the contest were assessed for completeness of immunization and 674 children were up-to-date for DtaP-IPV-Hib, and MMR, 41 children were overdue, and 43 could not be found in the database. A completed series of Prevnar (Pneu-C-7) was recorded in 357 children (47%), while 202 had incomplete series and 115 had no Prevnar recorded. We are now exploring follow-up strategies to improve the coverage rates for those vaccines not mandated under the *Day Nurseries Act*."

This initiative helps the health department to maintain more accurate immunization records and serves as reminder to parents whose children may not be up to date with immunizations.



The immunization team proudly received the City of Ottawa **Corporate Innovation Award** for Gerri the Giraffe in January 2008. The team was commended for the conception and development of Gerri as a proactive approach for promoting childhood immunization and creating partnerships in the community.

Order for Suspension from Attendance at Day Care/Nursery School
Pursuant to the Day Nurseries Act

To the Operator of: «FAC_NAME»

and to Parent/Guardian of:

Child: «FIRSTNAME» «SURNAME»	Sex: «SEX»
Address: «STREET»	D.O.B. «BIRTHDATE»
«CITY»	Day Care: «FAC_NAME»
«POST_CODE»	

I, Dr. Malcolm Lock, Medical Officer of Health for the Brant County Health Unit, order the suspension of the above named child

From: _____ until the immunization issue is resolved.

The reasons for this order are:

- I have not received a statement that the child has completed the prescribed program of immunization in relation to:

«NEEDS»

- I have not received a statement of medical exemption in respect to the above named child.
- The effective time period for the statement of temporary medical exemption has expired.
- I have not received a statement of conscience or religious belief (affidavit).
- I am not satisfied that the child has completed, has commenced and will commence the prescribed program of immunization in relation to the disease(s) indicated above.

TAKE NOTICE

Parent/Guardian of:	«FIRSTNAME» «SURNAME»
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that you are entitled to a hearing by the Health Services Appeal and Review Board if you mail or deliver to the Medical Officer of Health, Brant County Health Unit, 194 Terrace Hill Street, Brantford, ON N3R 1G7, and the Health Services Appeal and Review Board, 151 Bloor St West, 9th Floor, Toronto, ON M5S 2T8 (Send the operator of «FAC_NAME» within 15 days after this notice is served to you (for the purpose of the Act it is deemed to be served on the 7th day after it is mailed), notice in writing a hearing.

TAKE NOTICE that although this hearing is requested, this order takes effect when it is served.

Malcolm Lock
Malcolm Lock, M.D., M.P.H.
Medical Officer of Health

Date: 14 August, 2008

Working Today ... For A Healthy Tomorrow

As part of their Partnering for Protection grant project, BCHU is conducting research to determine the underlying reasons why day care children have incomplete immunization status for both required and recommended vaccines. A sample of 135 children aged zero to four years who have received suspension orders over the four month study period will be evaluated. Results are expected by the end of this year. Findings from this research will be used to establish priorities for public health interventions and policies related to immunization, such as the development of improved methods for obtaining immunization records from day care children.