# Specialty Societies Advancing Adult Immunization (SSAAI)

CDC-CMSS-ATS Cooperative Agreement

ATS Vaccine Initiative 2023



### ATS Vaccine Initiative

- Primary goal: improve adult vaccination rates (COVID19, influenza, pneumococcal) in subspecialty settings
- Five-year cooperative agreement to improve vaccination rates in highrisk adults
- \$7.5 million to ATS over 5 years
- Each society will fund and partner with 7-10 U.S. health systems
- ATS is onboarding three pilot health systems

#### Center for Disease Control





#### **Council of Medical Specialty Societies**

**C/\\SS** 



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American Society of Clinical Endocrinology American College of Cardiology American College of Occupational and Environmental Medicine American Geriatrics Society American Society of Clinical Oncology

American Society of Nephrology



7-10 Health Systems



# Pilot Health Systems

Health System	Rural/Urban	Race/Ethnicity	Population Need
Health System 1	Rural	Mostly white	<ul><li>1/3 covered by Medicaid.</li><li>Highest smoking/tobacco rates in US.</li></ul>
Health System 2	Rural + Urban	Large Hispanic and Native American population	<ul><li>70% medically underserved</li><li>68% covered by Medicaid/Medicare</li></ul>
Health System 3	Urban	Ethnically and racially diverse	<ul><li>Large unhoused population</li><li>Majority of patients publicly insured</li></ul>



### Focus Areas

# LEARNING & EDUCATION

Sessions at the ATS Conference

Immunization webinars



Disseminate lessons learned to broader ATS community and beyond

Fellowship education

#### **ATS RESOURCES**

Update & create patient, member & healthcare provider resources to include and/or emphasize immunization

Update policy statements

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Practice support

# ATS + CARE TEAM CULTURE

Focus Groups with ATS members

ATS leadership advocacy for immunization & role of providers

ATS Immunization Champions

Build immunization awareness within the ATS community

#### HEALTH SYSTEM PARTNERS

Partner with 7-10 health systems for 5 years

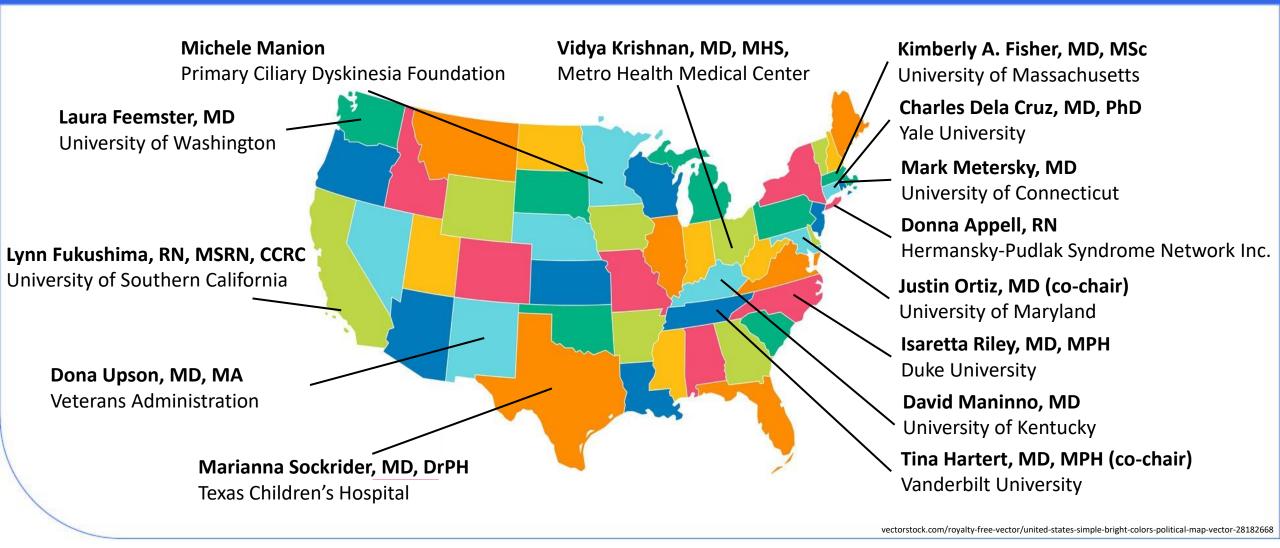


Collect baseline immunization data from each system

Review data from each health system on a monthly basis, reporting to CMSS quarterly.



# Advisory Panel





# Advisory Panel Subcommittees

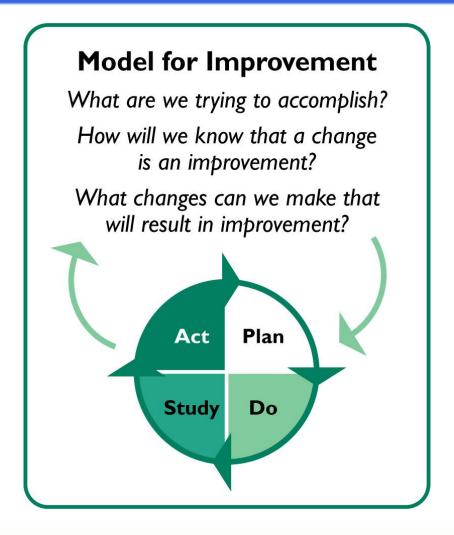
Subcommittee	Chair	Function
Health System Selection		Evaluate applications & select health systems.
<b>Evidence-Based Interventions</b>	Mark Metersky	Review existing intervention evidence & package for health systems partners.
Implementation	Laura Feemster	Advise health systems with intervention implementation and ensuring scalability.
Vaccine Data Capture	Vidya Krishnan	Advise on health system data capture and data requirements.
ATS Member Engagement	David Mannino	Assess vaccination knowledge, attitudes, and practices of respiratory care providers.
Patient Perspective	Donna Appell	Assess knowledge, attitudes, behavior of patients and families regarding immunization.
ATS Vaccine Resources	Dona Upson	Review and update ATS vaccine policy statements and vaccine resources.
Advocacy and Knowledge Dissemination	TBD	Share learnings and create a unified voice and key messages through ATS platforms.
Research/Publication	Charles Dela Cruz	Facilitate submission of manuscripts or peer-reviewed journals.



# Using a Quality Improvement Approach

#### Principles:

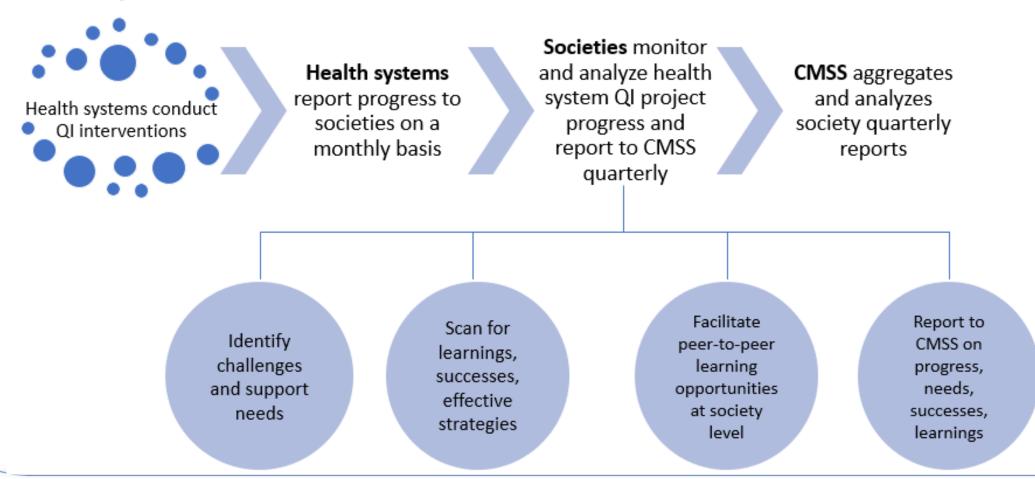
- 1. Understand systemic immunization practices within health systems
- 2. Implement effective practices to improve vaccination rates within pulmonary subspecialty practice
- 3. Measure changes over time
- 4. Share learnings with stakeholders (includes health system and broader ATS community)





# QI Intervention Monitoring and Reporting Flow:

### **Society Partner Roles**







# Data Framework

the clinic where QI

intervention(s) occur

#### **CMSS** Health System Society **Clinical Data Clinical Data Clinical Data** Patient-level, with some De-identified, De-identified, degree of integration aggregated counts (e.g., aggregated counts with Immunization across the health numerator, Information System (IIS) denominator, systems for each society Entire population from Stratified by exclusions/exceptions, the clinic where QI race/ethnicity and other demographics) for each intervention(s) occur health system demographics **Patient Data Patient Data Patient Data** De-identified, Patient-level collected De-identified, aggregated counts aggregated counts (e.g., through a survey (to be across the health developed) response rate, item systems for each society Sample of patients from responses,

demographics) for each

health system





Stratified by

demographics

race/ethnicity and other

## Measures

### Target Population:

Adult patients visiting pulmonary sub-specialty care clinics.

### Health system immunization data will include:

- Demographics (age, sex, race/ethnicity, Medicaid/Medicare)
- Diagnosis codes
- Vaccination status for multiple vaccines (COVID19, influenza, pneumococcal, etc.)

