

Using Technology & Outreach Workers to Improve Immunization Rates in East Orange, New Jersey

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Background

- Shazia Aslam, MPH, Outreach Worker Supervisor, East Orange FQHC, community liaison
- Karen Johnson LaRussa, RN, MALS, Health Educator, East Orange Health Department, community and school liaison
- Jane Sarwin, MPH, Immunization Coalition Coordinator, NJIIS (NJ Immunization Registry) liaison
- Joe Schwab, MD, MPH, Pediatrician, University of Medicine and Dentistry of New Jersey, (UMDNJ), UMDNJ IRB and GIS mapping team liaison



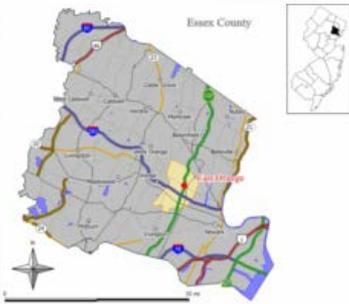


Team History

- Ms. Aslam and Ms. LaRussa are long standing members of Ms. Sarwin's Immunization Coalition. Ms. Sarwin and Ms. LaRussa have strong connections to the University of Medicine and Dentistry of New Jersey, Department of Preventive Medicine. The Department Chairman recommended Dr. Schwab to participate. Prior to NLAPH, team members had never collaborated on a specific project.

Population of Focus: East Orange, New Jersey

- East Orange is a 3.9 square mile urban community of approximately 66,000 residents, located in Essex County, New Jersey.
- The need to improve its socioeconomic and health status indicators is vital. According to the Selected Economic Characteristics, 2006-2010 American Community Survey 5-Year Estimates, 21% of East Orange residents live below poverty, 88.5% are black or African-American, and 17% receive food stamps.



Population of Focus: East Orange, New Jersey

- With respect to social determinants of health, on average, East Orange residents have lower levels of formal education, are less likely to have graduated from college, and are more likely to have very low incomes than other residents of the State or County.
- New Jersey's preliminary 2011 Electronic Birth Certificate data indicate that 51.5% of 2011 deliveries were Medicaid recipients.
- Only 25% of the children 19-35 months seen at the East Orange Health Department are age-appropriately vaccinated.

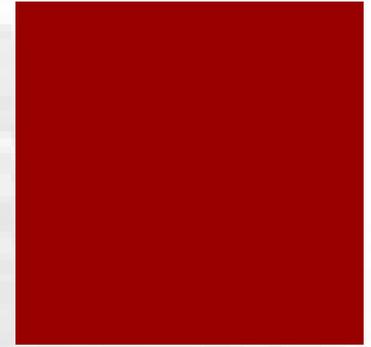
Team Vision

- Establish and support a culture of collaborative leadership among partners supported by systems
- Optimize use of technology (ie: GIS mapping and NJ immunization registry) to ensure up-to-date immunization status for all EO children
- Coordinated immunization delivery among all immunization providers including: school-based clinics, FQHCs, East Orange Health Department, and private practices.
- Increased inter-sectoral collaborations among immunization stakeholders
- Sustainable framework for increasing and maintaining timely immunizations

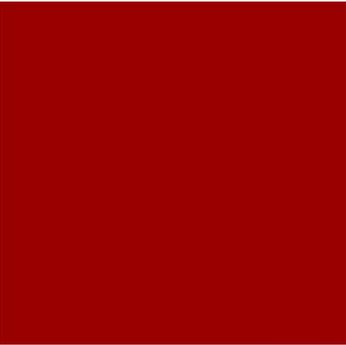
Team Leadership Goals

- Inter-sectoral collaborations among team members' organizations in articulating a vision. (Achieved)
- Integrating agency cultures – leading from bottom up rather than top down to gain approvals. Agencies can be reticent about collaborating. Strong leadership required. (Achieved)
- To transition our team vision into an achievable project. Restructured program goal based on NLAPH workshops to be SMARTer. (Ongoing)
- A new team without prior project collaborations. We each had individual leadership responsibilities, and as a team, were consensus driven and encouraged each others' input and ideas, keeping each others' MBTI preferences in mind.

Individual Leadership Growth – Highlights and What was Unanticipated



- Being part of a multi-cultural, multi-racial team inspired a unique sensitivity in constructing a project reflective of the demographics of our urban-based population
 - Being able to work in local, state, and federal systems to begin to achieve the foundation for our project.
 - Sensitization to the centrality of health equity in improving community well-being (Angela Blackwell).
 - Reflective learnings encouraged by our team coach, Vinny LaFronza.
 - Enduring motivation and inspiration derived from retreat presentations and networking opportunities.
 - Refocusing his practice of pediatrics around prevention and equity (Joe).
 - Personal connections nationwide made through NLAPH, extensive, enlightening resources (phConnect), retreat and webinar learnings. (Karen, Shazia, Jane)



Leadership Learning Elements Transferred to Other Work

- HPV initiative – Approval from Chair of Department of Preventive Medicine to have GIS mappers map HPV data from East Orange Health Department and East Orange FQHC (same project as this, with an HPV vaccination focus)
- Applying team leadership principles in traditionally structured organizations. (Group)
- Using MBTI concepts to lead more effectively

Community Health Improvement Project

- Big Picture – How it has changed:
 - Stakeholders – Focused on four team collaborators with plans to incorporate other stakeholders as project evolves
 - Environmental and political context – The team was able to navigate the political landscape and gain written approvals from partners
 - Critical leadership challenges – What we thought would be an NJ DOH challenge turned out not to be
 - Pathway to change - Static
 - Vision/desired future state - Static

Project Outcomes

- Buy-in of four partner agencies
- Signed Memorandum of Agreements for participation of two immunization sites
- IRB exam successfully completed by all team members and outreach workers (2)
- IRB submission to University of Medicine and Dentistry of New Jersey
- UMDNJ GIS Mapping Team on-board
- Secured use of NJIIS (NJ Immunization Registry) data from Project Partners
- Established framework for replication of similar projects



Leadership – The Impact of the NLAPH program on Our Project

- Impact of NLAPH speakers on the importance of harnessing political will and power
- Significance of our team coach in constructive revamping of our project
- Influence of retreat and webinars in expanding our knowledge base and mindset

The Future: Team Goals Moving Forward

- Project implementation
- Continued public health collaborations and interventions
- Applying new-found leadership skills to engage additional inter-sectoral collaborators
- Realize the full potential of NJIIS in immunization delivery
- Establish a New Jersey Public Health Prevention Institute

NLAPH Information Application Among Team

- Karen – Apply mapping information to improve public health prevention practice
- Shazia – Reach out to East Orange FQHC patients to improve immunization rates and encourage a mentality of prevention
- Joe – Involve pediatric residents in projects to help them recognize that prevention is vital to good pediatric care
- Jane – Share NLAPH learnings with staff to help them grow as individuals and leaders