



Onsite Immunization Clinics at Strategically Identified Locations: A Collaborative Approach to Reach and Capture Underserved Populations within El Paso, Texas

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Project Overview

- Through the integration of demographic and health history data (collected via a race, ethnicity and language (REAL) questionnaire) into the El Paso Community Health Atlas database (ATLAS), health planners and health care providers can better understand the health profile of populations in the El Paso region.
- Collaborative effort between The City of El Paso Department of Public Health (CEPDPH) and the University of Texas at El Paso (UTEP), the host and regulators of ATLAS.
- ATLAS stores de-identified health data obtained through participation in a referral interview during community outreach events and uses the data to support the availability of onsite services at future events.
- The ATLAS system is also used to track service completion rates.

AIM

- CEPDPH aimed to increase access and connect ATLAS project participants to preventive health screenings.
 - It was important to incorporate community partners and stakeholders that provided venues and supported the health department with reaching specific populations and establishing a linkage to health services.
 - Said community partners and community health workers also served as referral systems to identify, inform, and refer persons to initiate healthy decisions such as receiving the vaccines.



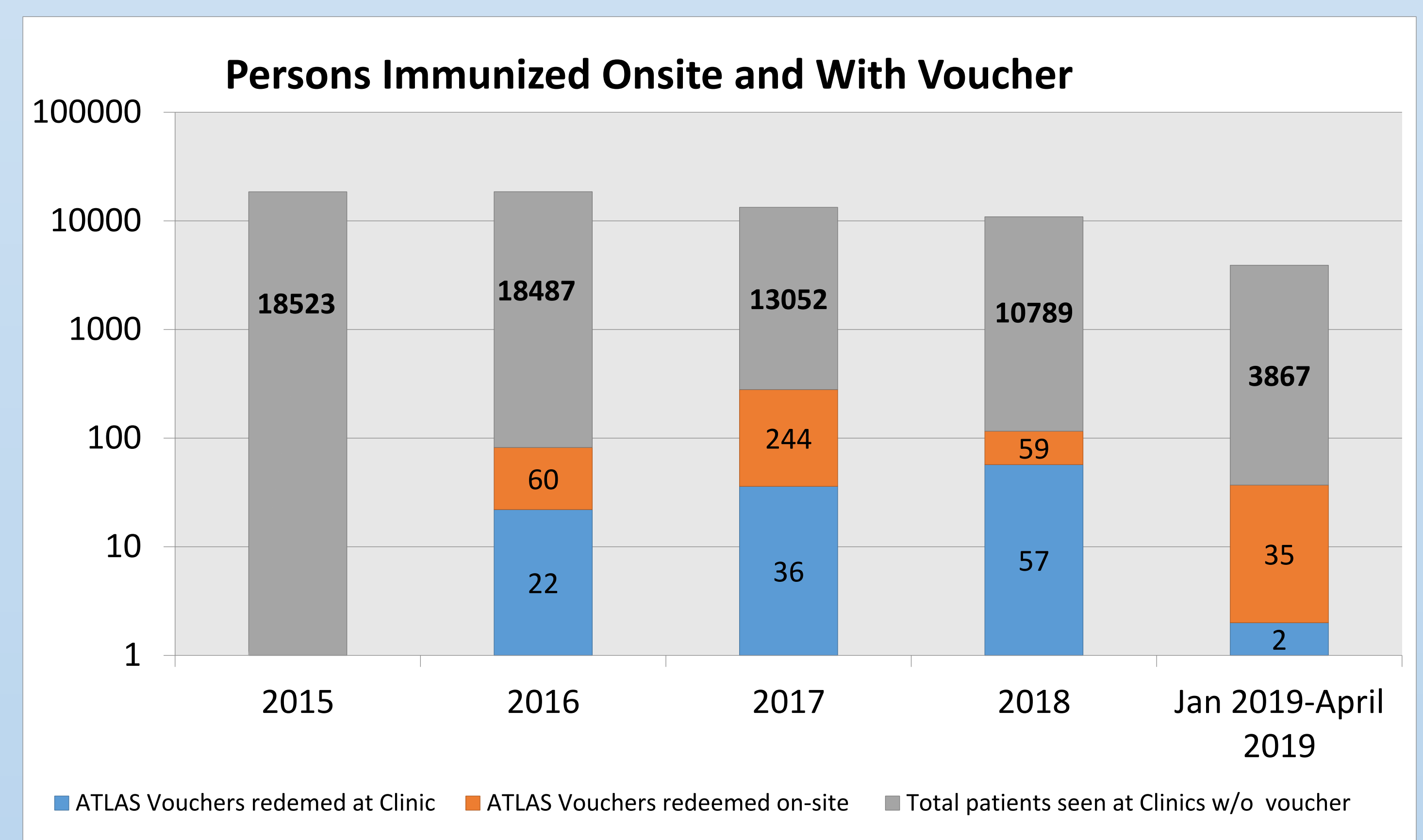
Methods

- CEPDPH hosted 124 onsite vaccination clinics during 2016 to 2019 to expand and facilitate access to pertinent health screenings.
- The target was to collaborate with entities who served similar or identical populations
 - Low-income Uninsured
 - Medicaid Recipients
 - Low-income defined as 150- 175% below the HHS Federal Poverty Level (FPL) guidelines
- Supplemental to hosting community outreach in the City of El Paso, the CEPDPH staff deployed to rural areas in the outskirts of the City including Anthony, Canutillo, Fabens, San Elizario, Sierra Blanca, and Socorro, TX.
- A comparative analysis examining data from 2016-2019 was conducted to evaluate the impact of providing an onsite service to facilitate access to health services. A descriptive analysis was also completed to quantitatively describe the project enrollees.

Results

ATLAS Project enrollees were educated, received referrals to health, social, and human services, and/or obtained one or more preventive health services.

- Total Population from 2016- 2019 : 1085 individuals
- 89% of the total population identified as Hispanic
- The gender makeup was 66% female and 34% male
- The average age was 49 years old
- 82% indicated a household income of \$20,000 and below
- About 71% of the project participants reported being uninsured
- 398 persons vaccinated onsite and 117 immunized at clinic with voucher referral



Conclusion

- Participation at onsite immunization events was unpredictable and thus, it was reinforced with prior registration and/or active participation by hosts as there were events with less than 5 people for the entire duration of an event. Host guidelines were implemented to include at least 10 registered clients prior to an event.
- The availability of nursing/clinical staff at the CEPDPH's Immunization Clinic also differed per month and occasionally the mobile unit only deployed twice a month in comparison to the standard once a week service. Scheduling coordination was important to facilitate onsite immunization clinics.
- During October and November, the onsite vaccinations were very popular and frequently requested by partners, as individuals wanted the flu vaccine in preparation for the upcoming flu season.
- Persons who received other types of health vouchers or required additional immunizations not offered onsite obtained bus tokens and shuttle services to assist with obtaining the vaccines/ screenings at their convenient time.
- Follow up initiatives in the form of three telephone calls, letters, and occasional home visits were also completed to encourage and further educate individuals who had not obtained their preventive health service.
- In addition to promoting events through flyers and posters, CEPDPH staff held educational briefings and utilized incentives to encourage participation into the project.
- To address prolonged clinical waiting times as indicated in customer satisfaction reports, 2-6 Immunization Staff went to outreach events to aid with quicker processing times and expedited service.
- Persons who came to the outreach events for alternative reasons such as blood pressure screenings or eye checks were also identified, screened, and linked to ATLAS health screenings.

Acknowledgments

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