

MCCMH Preventive Care Guidelines - Immunization Awareness			
Last Updated:	Owner:	Pages:	
10/01/2024	MCCMH Chief Medical Officer	3	

I. PURPOSE:

- A. To provide network providers with recommendations for educating persons served and their guardians on the importance of keeping adult immunizations up to date as recommended by the most current Centers for Disease Control and Prevention (CDC) guidelines and standards of care.
- B. To create awareness for providers on the important role they must play in assisting persons served and their guardians in following appropriate preventive care guidelines. It is through the provision of guidelines that MCCMH seeks to empower providers to create their own processes to ensure awareness.
- C. To mitigate the risk of occurrence or recurrence of certain medical conditions by assisting persons served and their guardians in remaining proactive with preventive care practices.

II. DEFINITIONS:

None.

III. GENERAL INFORMATION:

Attached to these guidelines is an educational handout from MCCMH that provides a description of the most popular immunizations recommended by the CDC for the adult population for the 2024 year.

IV. RECOMMENDED BEST PRACTICES:

Based on the information included in the attached educational handout and in concurrence with the 2024 CDC guidelines established, as it pertains to vaccinations, it is the recommendation from this office to all of in-network and out-of-network providers that:

- A. Providers develop a process to educate their direct care staff on the most up to date guidelines and resources related to immunization recommendations.
- B. It is up to the discretion of the provider to develop a process that guarantees how persons served and their guardians are being provided education on this subject.
- C. Providers may opt to use the MCCMH Educational Handout on Promoting Vaccination Awareness attached as handouts to their staff, persons served and their guardians as part of their efforts to create awareness on the subject. The use of the 2024 MCCMH educational handout disseminated along with these recommendations is *optional*; however, the expectation of the role they must play on providing this education is not. Providers

- may develop their own educational materials to achieve this awareness goal always abiding by the appropriate up to date CDC guidelines.
- D. It is the provider's responsibility to update their educational materials as the CDC publishes new or revised guidelines.
- E. Providers should remain aware of the importance of these guidelines and encourage persons served and their guardians to, at least yearly or during the persons served annual physical exam appointment, consult with their health care providers about what immunizations based on their age, allergy profile, and health history, they need to be aware of and consider.
- F. Providers and direct care staff must know that the persons served medical health care provider is the <u>ultimate</u> authority in determining when a given vaccine type is deemed to be appropriate or contraindicated based on having a full understanding of the individual's medical history and allergy profile. It is of paramount importance that the person served, and their guardians also understand this and that they always follow and abide by their health care provider's recommendations.
- G. As part of being integrated care advocates, it is important that providers encourage our persons served on an annual basis to stay up to date with their vaccination schedules/boosters. Providers must have their staff (i.e., supports coordinator) work collaboratively with the individual's medical provider to coordinate, at least annually, a discussion about this with the person/guardian.
- H. Providers must develop a process for their direct care staff or supports coordinator to document the record instances in which education related to the issue was provided.
- I. Granted all of the above occur, if a person/guardian were to exercise his/her right to decline the above recommendation, the provider must develop a process for their staff or supports coordinator to thoroughly date and document efforts made to educate and encourage the person/guardian on the issue and document the stated reason(s) for the decline by the person/guardian.
 - 1. Appropriate documentation should at least include the date, name and credentials of the staff providing the education/encouragement and, as applicable, the reason(s) stated by the person and/or their guardian in the event they choose to decline the education or recommendations from their health care provider.
 - 2. In the event medical contraindications are the reason(s) for a person to not be a good candidate for a given vaccine or for revaccination, the provider should ensure they implement a process for their staff or supports coordinator to document those. It is the expectation that those instances are clearly documented in the record at the time they are due to revisit each year.
- J. In cases of persons served whose cause of death are related to a pneumonia diagnosis or possible complications secondary to it, the documentation of such becomes especially important and necessary when submitting Death Reports or Root Cause Analysis to MCCMH's Critical Risk Management Committee (CRMC).
- K. In the event those are not initially submitted by the provider, the CRMC reserves the right to request this information from the provider when conducting the review of a case in which this is deemed to be pertinent and/or critically relevant.

V. REFERENCES:

VI. https://www.cdc.gov/vaccines-adults/?CDC AAref Val=https://www.cdc.gov/vaccines/adults/index.html

MCCMH MCO Policy 8-003, "Reporting and Responding to Critical Incidents, Sentinel Events, and Risk Events."

Annual Review Attestation / Revision History:

Revision:	Revision/Review	Revision Summary:	Reviewer/Reviser:
	Date:		
1	08/1/2020	Development of Guidelines	MCCMH Chief
			Medical Officer
2	9/18/2023	Updated for 2023	MCCMH Nursing
			Administrator
3	10/01/2024	Updated for 2024	MCCMH Nursing
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