Provider Characteristics and Response Rates in the National Immunization Survey

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National Immunization Survey

Data collection conducted quarterly since April 1994.

Sponsored by the National Immunization Program and the National Centers for Health Statistics, both of the Centers for Disease Control and Prevention

National study—data collected in 78 nonoverlapping Immunization Action Plan Areas:

• 50 states, 27 metropolitan areas, and the District of Columbia.



National Immunization Survey

Yearly, 10 million telephone calls made to identify households with 35,000 age-eligible children.

Measures vaccination coverage of children between the ages of 19 and 35 months of age.





Provider Record Check Study

Added to the survey in 1995 because household immunization reports are often inaccurate

Obtain name and address of immunization providers, and permission to contact them

Approximately 85% of households give consent to contact providers

Mail survey

Request child's immunization history from medical provider(s)

Provider data used to calculate estimates of vaccination coverage



Tracking provider response

Mailing more than 30,000 questionnaires each year (Children may have 1+ providers)

Average: 1.5 providers per child

Some providers receive requests for immunization histories for several children in a quarter

Previously, the NIS did not track individual provider cooperation, only the percentage of children with provider data





Questionnaire Response rates

Overall, in the first half of 2002, 76% of questionnaires were returned with immunization information.

13% were not returned

11% were returned, but did not have immunization data





Looking for patterns of non-response

Constructed a provider database in order to analyze provider response patterns

Hypothesis was that higher provider burden would create greater non-response

Database would help us identify individual "problem" providers





Assessing provider burden

17,267 child-provider pairs in the first two quarters of 2002 data collection

Identified 10,100 providers

Average number of questionnaires per provider: 1.7

Range: 1 – 35





Distribution of Providers and IHQs by # of Children

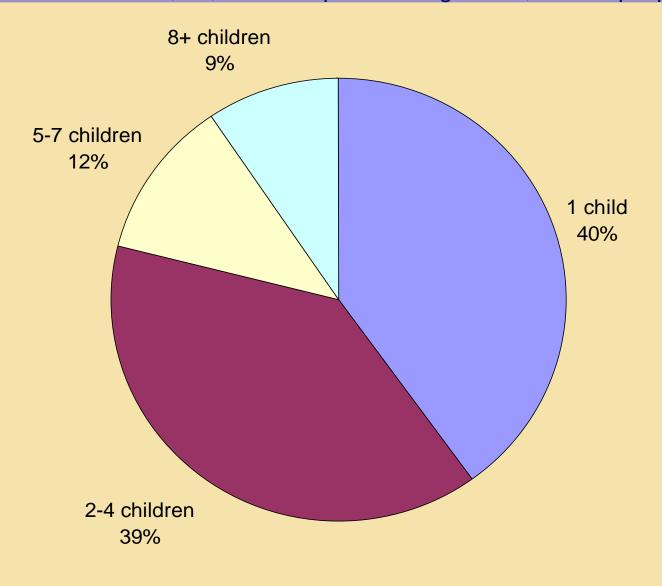
Provider Burden	#Providers	%Providers	#IHQs	%IHQs
1 child	6,883	68.1%	6,883	39.9%
2-4 children	2,714	26.9%	6,728	39.0%
5-7 children	355	3.5%	2,039	11.8%
8+ children	148	1.5%	1,617	9.4%
Total	10,100	100.0%	17,267	100.0%





Distribution of Children by Provider

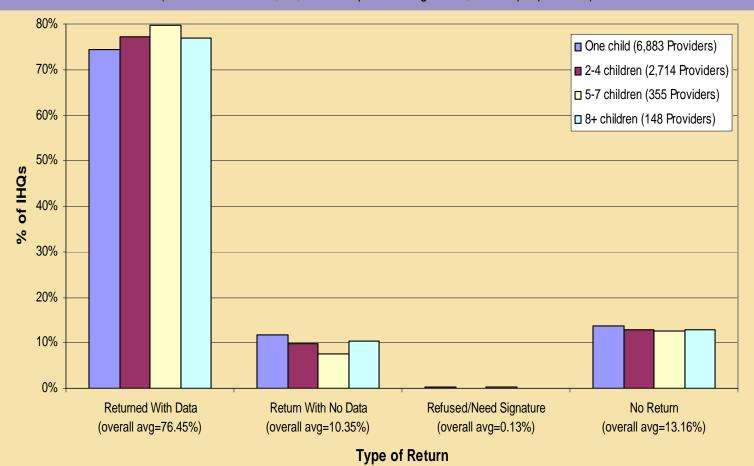
(Q1 2002 - Q2 2002, 17,267 attempted mailings to 10,100 unique providers)







Return Types by Number of Children (Q1 2002 - Q2 2002, 17,267 attempted mailings to 10,100 unique providers)







Conclusions

Develop strategies to manage by provider, and not just child

Problems are with our smallest and largest providers

Small providers

- Tend to be private or military
- May have institutional barriers to participation

Large providers

- Tend to be public health departments
- Motivated to participate
- Project can facilitate cooperation by responding to individual needs







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