

# HPV VACs

Vaccinate Adolescents against Cancers



## An HPV Vaccination Health System Case Study from Sanford Health

### Featuring:

Lexi Pugsley, Program Director South Dakota Comprehensive Cancer Control Program

Tracy Bieber, Immunization Strategy Manager, Sanford Health

Molly Black, Associate Director, American Cancer Society VACs Program



## Efforts to Increase HPV Vaccination Coverage Rates in SD

**Problem:** Low HPV Vaccination Coverage Rates Among Adolescents in SD

Three-dose HPV vaccine series completion (NIS-Teen)	2013 (revised)	(2014)	(2015)
Males ages 13-17	7.7%	23.5%	22.0%
Females ages 13-17	40.9%	33.1%	32.4%

**Solution:** Target health systems to implement evidence-based interventions to increase vaccination rates

# Increasing HPV Vaccination Rates in South Dakota

**Approach:** Develop a structured Request for Application process to select health system partners to collaborate on HPV vaccination interventions

**Partners:** SD Cancer Prevention and Control Program, SD Cancer Coalition, SD Breast and Cervical Early Detection Program (All Women Count!), and the SD Immunization Program

## **Award Requirements:**

- Systems level change approach that impacts the permanent organizational culture around HPV vaccination
- Demonstrate potential for sustained efforts and lasting impact
- Quality improvement team
- Funds could not cover vaccine or vaccine administration fees

## **Evidence-based Intervention Options:**

- Client Reminder and Recall Systems
- Provider Assessment and Feedback
- Provider Reminders
- Standing Orders
- Community Based Interventions (Implemented in Combination)

**Project Period:** Year One: July 1, 2015 - June 30, 2016 | Year Two: July 1, 2016 - June 30, 2017

**SD DOH Support:** Funding up to \$10,000, practice coach, evaluation support, data feedback

# Increasing HPV Vaccination Rates in South Dakota

## **Data Indicators:**

### **Baseline**

- Current policies and practices related to HPV vaccination
- Eligible patient population
- Baseline HPV vaccination coverage rates for varying age groups (1<sup>st</sup> dose and series completion)
- Meningococcal vaccination data
- Total HPV doses administered

### **During Project Period (Reported Quarterly)**

- Total HPV doses administered
- Numerator, Denominator, and Percentage of patients with zero doses, two doses, and series completion for males and females for three age groups
- Monthly percentage of adolescents 11-26 with zero doses and series completion by practice site and individual provider
- Data on client reminders
- Process indicators

# Dissemination of Outcomes

## Implementing Evidence-based Interventions to Increase HPV Vaccination Rates in SD

The South Dakota Comprehensive Cancer Control Program in partnership with the All Women Count! program released a funding opportunity aimed at improving human papillomavirus (HPV) vaccination rates in South Dakota. The project was targeted to healthcare facilities to implement evidence-based interventions and system change strategies. Technical assistance and funding in the amount of \$10,000 was provided during the project.

### PROJECT DETAILS

**Sanford Health**  
(7 Primary Care Clinics  
in Sioux Falls)

male and female  
adolescents ages  
**11-26**

**17,000**  
Adolescents

**July 1, 2015 -  
June 30, 2016**

**Project  
Partner**

**Target  
Population**

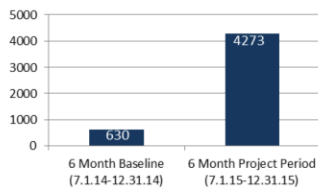
**Eligible  
Population**

**Project  
Period**

### PROJECT OUTCOMES

#### HPV Vaccine Doses Administered

578.3% increase over baseline

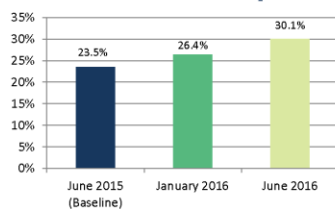


Approximately 7,000 doses of HPV vaccine were administered over the one year project period

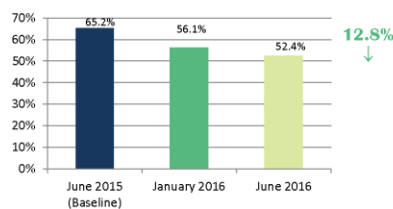
#### Evidence-based Interventions Implemented

- **Client Reminders** -  
Over 41,500 client reminders distributed (first dose and series completion)
- **Provider Assessment and Feedback** -  
Individual provider results (unblinded) were shared and compared among all physicians in each practice quarterly
- **Community-based Interventions** -  
Public education through panel discussions and screening of the Someone You Love Documentary

#### Three-dose Series Completion



#### Zero Doses of HPV Vaccine Administered



Year One Outcomes  
Infographic

National Comprehensive  
Cancer Control Success  
Story Submission

Abstract: CDC Cancer  
Conference (August 2017)

Final Outcomes Report  
(Anticipated in Fall 2017)

Presentations as  
Requested

## **Contact Information:**

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SD Comprehensive Cancer Control Program Coordinator  
South Dakota Department of Health  
P: 605.626.2660  
[lexi.pugsley@state.sd.us](mailto:lexi.pugsley@state.sd.us)

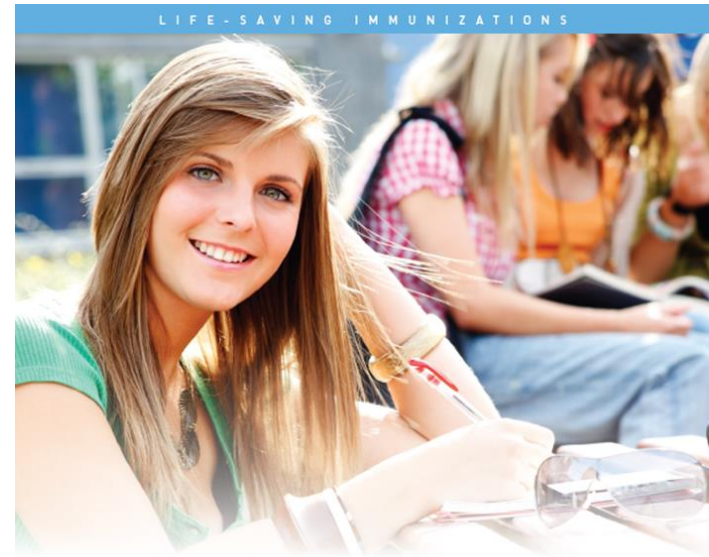
SD Cancer Coalition Website: [cancersd.com](http://cancersd.com)

Sanford Health  
Comprehensive Cancer Coalition  
HPV Grant

Tracy Bieber  
Immunization Strategy

# Grant Expectations

- Notified of award May 2015
  - \$10,000 to increase HPV rates within 7 Sanford Family Medicine Clinics
- Requirements of grant were to develop a client reminder system and a provider assessment intervention



LIFE - SAVING IMMUNIZATIONS

## Are you up-to-date?

An immunization takes mere minutes and can help protect you against life-threatening illnesses. Get these common ones while you are healthy and between the ages of 11 and 26.

**HPV: For human papillomavirus (HPV)**—Prevents certain kinds of cancer

**Tdap: For tetanus, diphtheria and whooping cough**—Prevents jaw tightening, muscle spasms, issues breathing and severe coughing

**MCV: For meningitis**—Prevents issues with the membranes surrounding the brain and spine

Call your local Sanford primary care provider to make an appointment or visit [sanfordhealth.org](http://sanfordhealth.org)  
keyword: adolescent immunizations to learn more

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HEALTH

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**SANFORD**  
HEALTH



# Educate

- June 2015-Mandatory education for all providers and nurses in each Family Medicine Clinic.
- February 2016 - Second round of education to providers and nursing
- Merck assisted with vaccine and disease education, framing of the conversation, and supplied reminder resources such as magnets and a texting program



LIFE - SAVING IMMUNIZATIONS

## Is your child protected?

If your child is between the ages of 11 and 26, it is recommended he or she receives the following immunizations:

- HPV: Human papillomavirus vaccine
- Tdap: Tetanus, diphtheria and whooping cough vaccine
- MCV: Meningitis vaccine

Call your local Sanford primary care provider to make an appointment or visit [sanfordhealth.org](http://sanfordhealth.org)  
keyword: adolescent immunizations to learn more

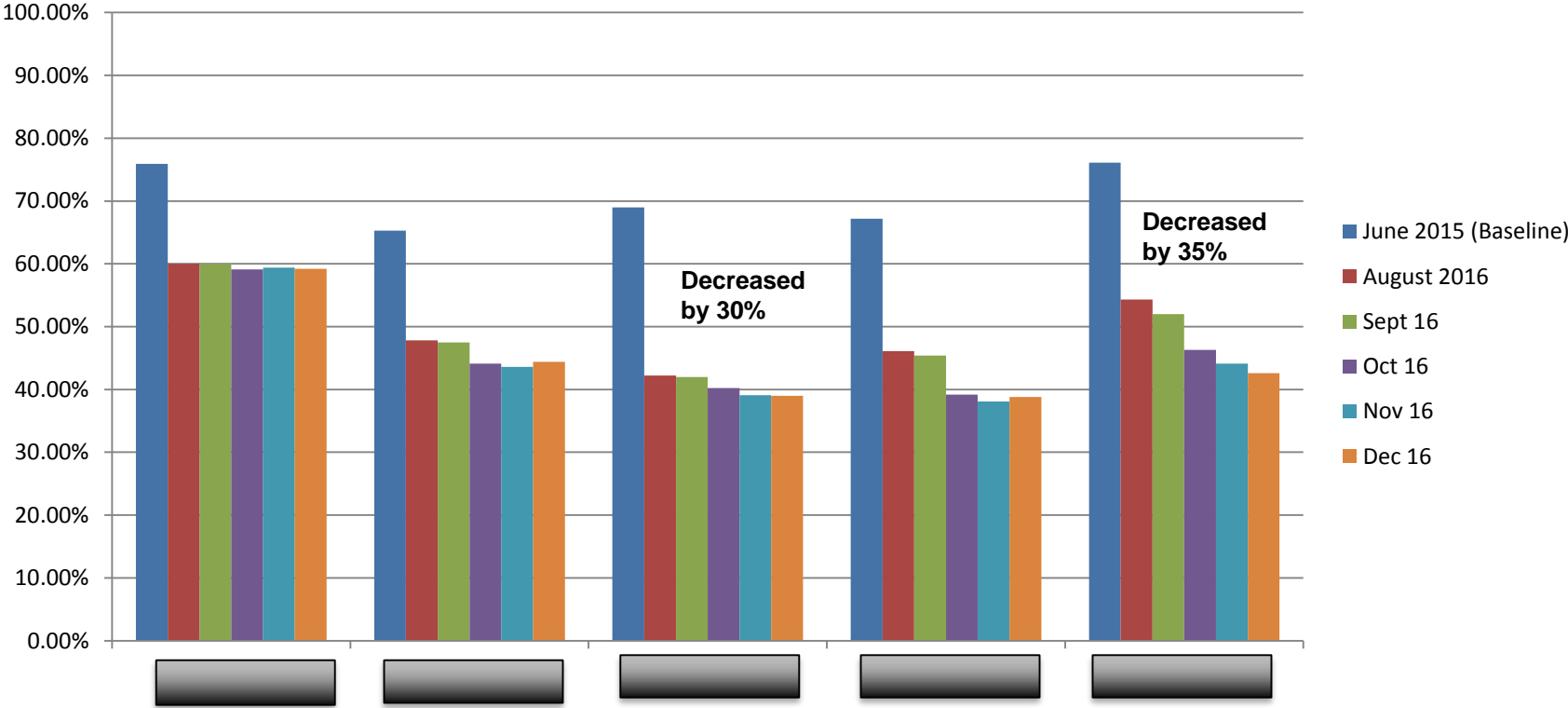
**SANFORD**  
HEALTH

# Provider Feedback

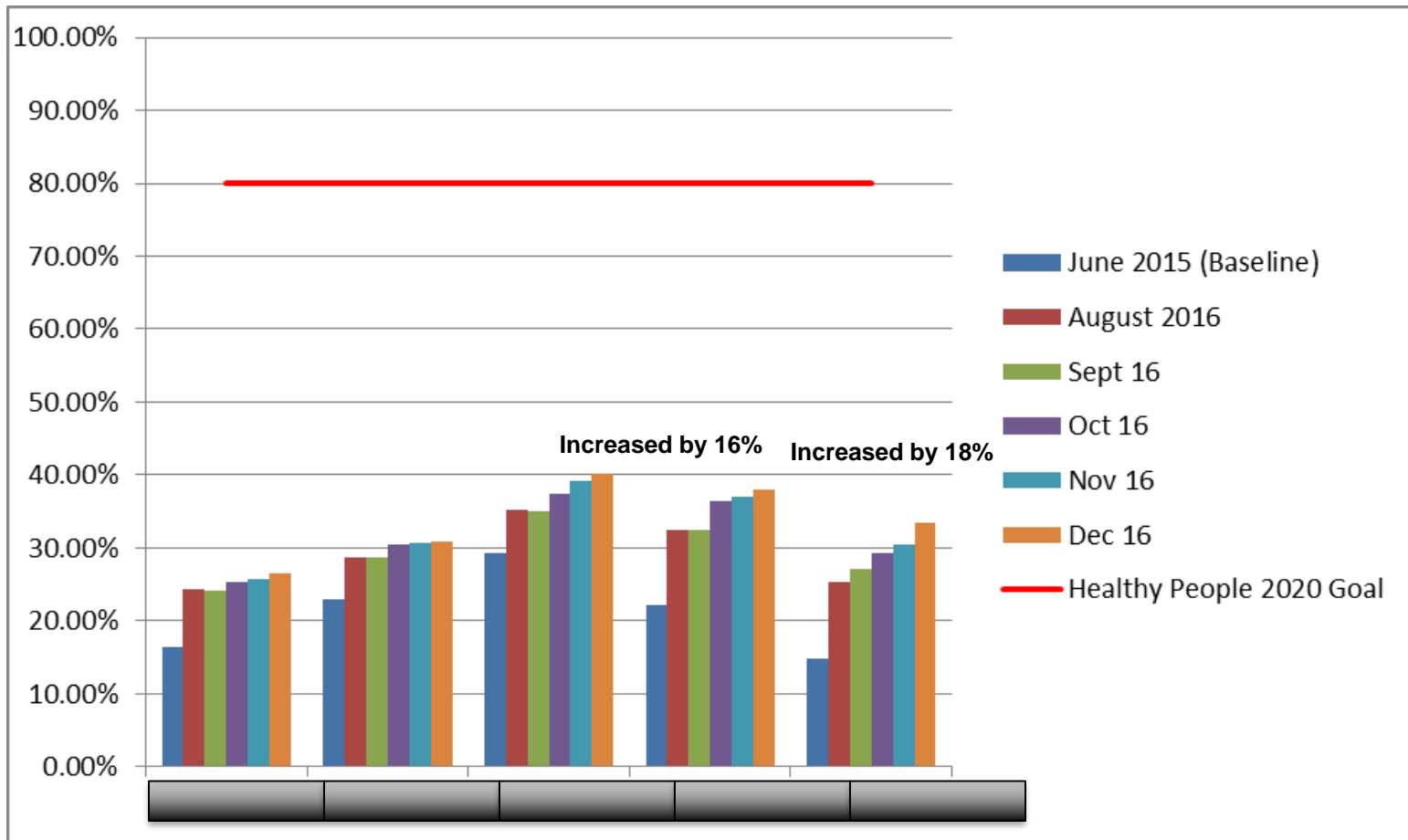
- Reports created to show individual provider and clinic vaccination rates for Tdap, Meningococcal, and HPV
  - Healthy People 2020 goals were shared at each education session and with monthly data
- Rates of zero doses of HPV vaccine decreased on average 10% within the seven sites
- Rates for series completion increased on average 5%



# HPV- Percentage of Zero Doses

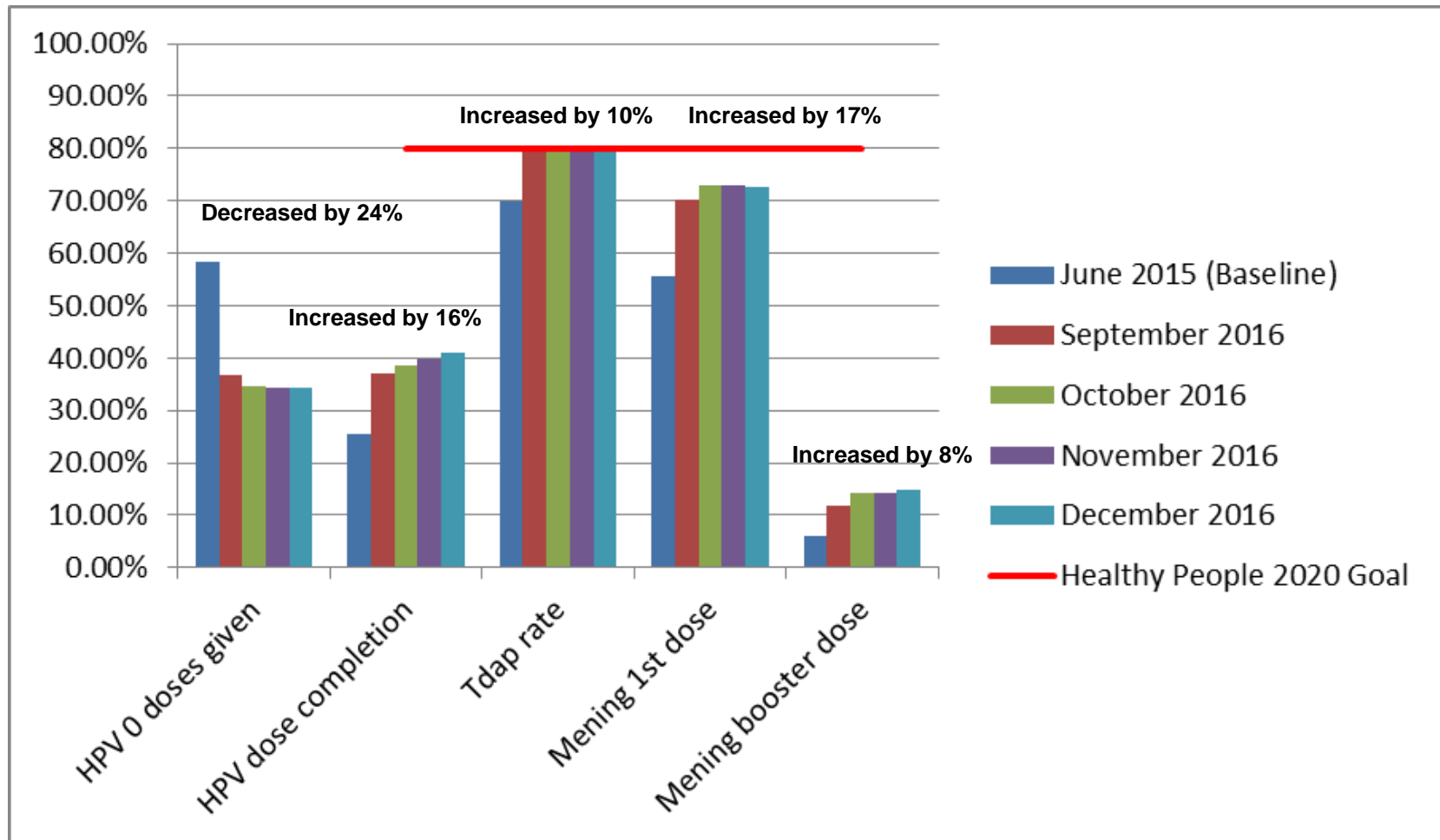


# HPV- Percentage of Completed Series



# Adolescent Immunizations

## Clinic Rates



# Client Reminder System

- August 2015 - First reminders sent via automated phone call and mailer
- November 2015 - Second automated call deployed
- March 2016 - Second mailer sent



LIFE - SAVING IMMUNIZATIONS

## Protect your child with immunizations

Immunizations are one of the best ways to keep your child healthy and protected from dangerous illnesses. And while your child received many when they were younger, there are also vaccines recommended for adolescents between 11 and 26.

**HPV: For human papillomavirus (HPV)**—Prevents certain kinds of cancer

**Tdap: For tetanus, diphtheria and whooping cough**—Prevents jaw tightening, muscle spasms, issues breathing and severe coughing

**MCV: For meningitis**—Prevents issues with the membranes surrounding the brain and spine

Call your local Sanford primary care provider to make an appointment or visit [sanfordhealth.org](http://sanfordhealth.org) keyword: adolescent immunizations to learn more

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# No Missed Opportunities Culture

- “Every patient, every time”
- “Same Way, Same Day”
- Missed Opportunities report created
- Chart audits for any “missed opportunities” and feedback provided to clinic providers, nursing, supervisor and director



# Educational Opportunities for the Community

- Family Fun Fest booth
  - July 25<sup>th</sup>, 2015
- CDC webinar for staff on HPV for Sanford on July 28, 2015
- College events sponsored by Sanford
  - Southeast Tech, SDSU, USD
- Community Screening of “Someone You Love: The HPV Epidemic” by Frederic Lumiere on June 14, 2016





# Additional Activities

- Marketing Plan
  - Digital billboards
  - Social media
  - Radio
  - Banners
  - Print advertising
  - 605 & SHE Magazine ads
  - Empire Mall table tents
  - Panel cards
  - Reminder card
  - Flyers
  - Sanford lobby screens
  - Internal marketing



**Protect your child**  
Life-saving immunizations

**Is Your Child Up-to-Date on Immunizations?**  
At Sanford Health, we want to make sure you and your family are protected against illness, and one of the best ways to do that is through immunizations. Immunizations have protected millions of kids from potentially deadly diseases and saved thousands of lives. Certain diseases have become so rare because of wide-spread immunizations that many parents are currently questioning whether their children need them. But this is a common misconception as most diseases that vaccines prevent against still exist.

We recommend patients between the ages of 11 and 26 receive the following three immunizations:

- HPV: The human papillomavirus (HPV) vaccine is given in three shots over six months and prevents certain kinds of cancer
- Tdap: A tetanus, diphtheria and whooping cough booster to prevent jaw tightening, muscle cramps, issues breathing and severe coughing.

**Who Provides These Immunizations?**

- Sanford 26th and Sycamore Family Medicine
- Sanford 34th and Kiwanis Family Medicine
- Sanford 41st and Sertoma Family Medicine
- Sanford 49th and Oxbow Family Medicine
- Sanford 4th and Sycamore Family Medicine
- Sanford 69th and Louise Family Medicine
- Sanford 69th and Minnesota Family Medicine
- Sanford Health Stevens Center Walk-In Clinic
- Sanford USD Family Medicine
- Sanford Children's 69th and Louise
- Sanford Children's Clinic
- Sanford Children's Clinic 26th & Sycamore
- Sanford Children's Hospital
- Sanford Children's Specialty Clinic

# Sanford Health HPV Vaccination Implementation Grant Overview

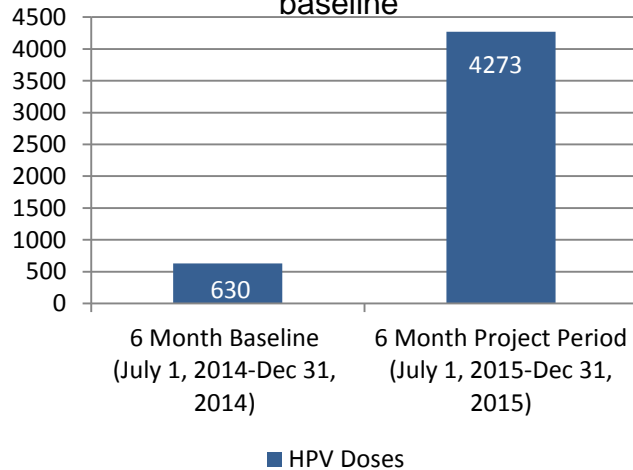
- During the Year 1 Project Period:
  - Over 41,500 client reminders distributed
  - Nearly 7,000 doses of HPV vaccine administered
  - 12.8% decrease in adolescents with zero doses of HPV vaccine administered
  - 6.6% increase in adolescents who have completed the three doses series
  - Hosted “Someone You Love: the HPV Epidemic” Documentary Screenings at colleges and for the public



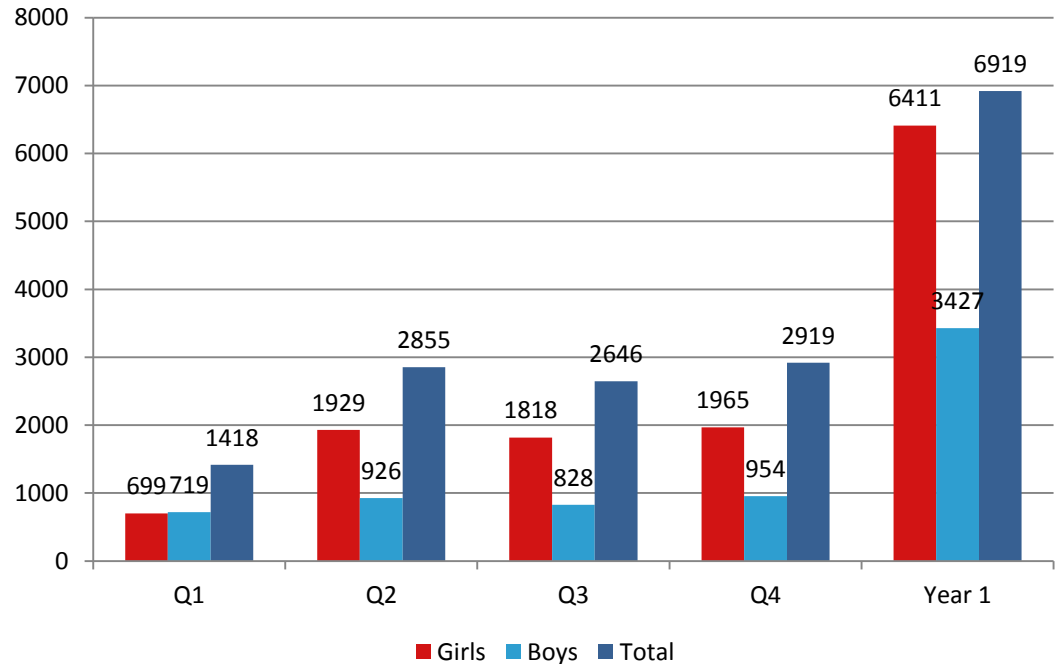
# HPV Vaccine Doses Administered

## HPV Vaccine Doses Administered

578.3% increase over baseline

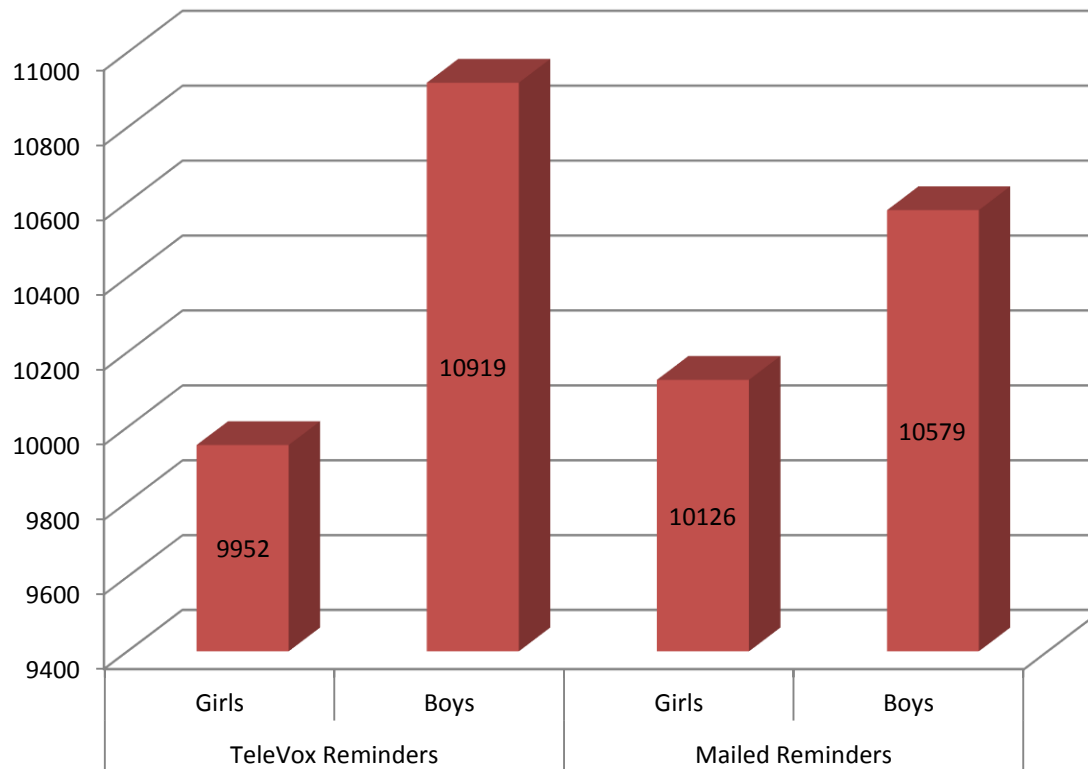


## Number of HPV Vaccine Doses Administered



# Client Reminders

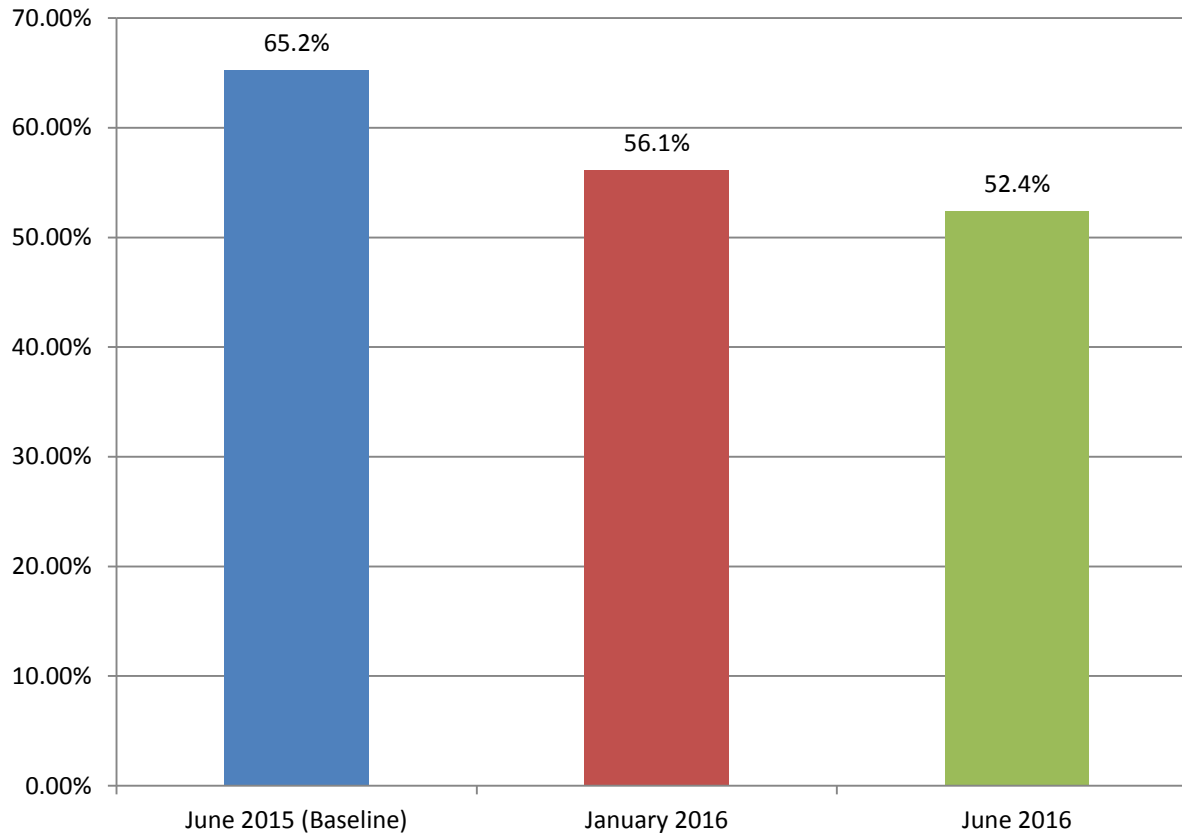
Number of Client Reminders Disseminated



Over 41,500  
client  
reminders  
disseminated  
over the  
project period

# Zero Doses

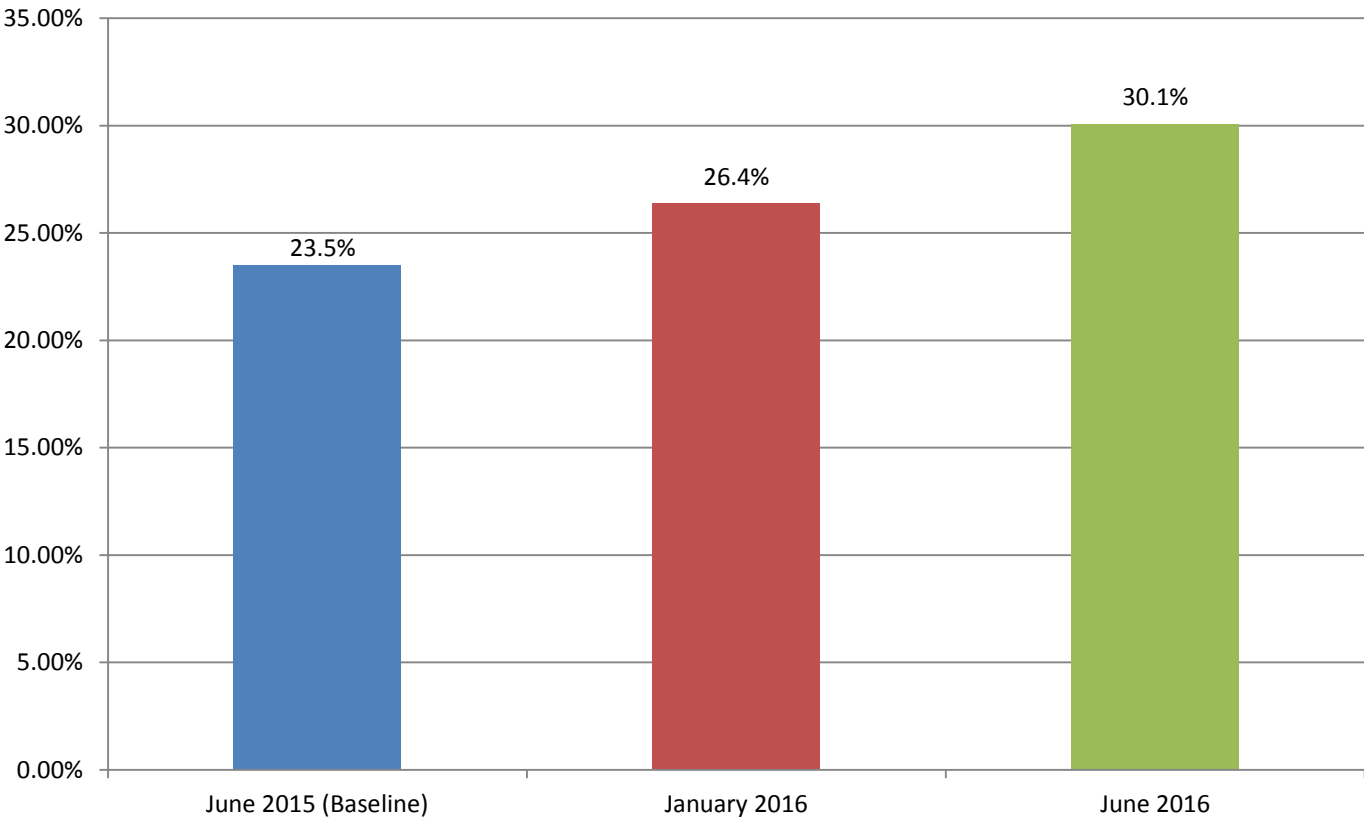
Adolescent boys and girls ages 11-26 at the seven participating primary care clinic sites with zero doses of HPV vaccine administered



**12.8% ↓  
in zero doses  
administered**

# Three Dose Series Completion

HPV three-dose series completion among adolescent boys and girls ages 11-26 at the seven participating primary care clinic sites



**6.6% ↑  
in three dose  
series  
completion**

# Three Dose Series Completion

## June 30, 2015 vs. June 30, 2016

Gender/Age Category	Percentage of patient population with three doses of the HPV vaccine for the 7 clinic sites	Increase
Girls ages 11-12	June 30, 2015: 25% June 30, 2016: 31%	6%
Girls ages 13-17	June 30, 2015: 46% June 30, 2016: 51%	5%
Girls ages 18-26	June 30, 2015: 40% June 30, 2016: 42%	2%
Boys ages 11-12	June 30, 2015: 13% June 30, 2016: 21%	8%
Boys ages 13-17	June 30, 2015: 23% June 30, 2016: 31%	8%
Boys ages 18-26	June 30, 2015: 7% June 30, 2016: 10%	3%

# Next Steps.....

- Expansion to all Sanford South Dakota clinics
- Focus on series completion for the pilot family medicine clinics
- Goal is to reach 80% Healthy People 2020 goal by 2020!





# QUESTIONS?

Tracy Bieber

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# HPV VACs

Vaccinate Adolescents against Cancers

## Steps for Increasing HPV Vaccination in Practice: **An Action Guide**

Molly Black | Associate Director, HPV Vaccination  
American Cancer Society

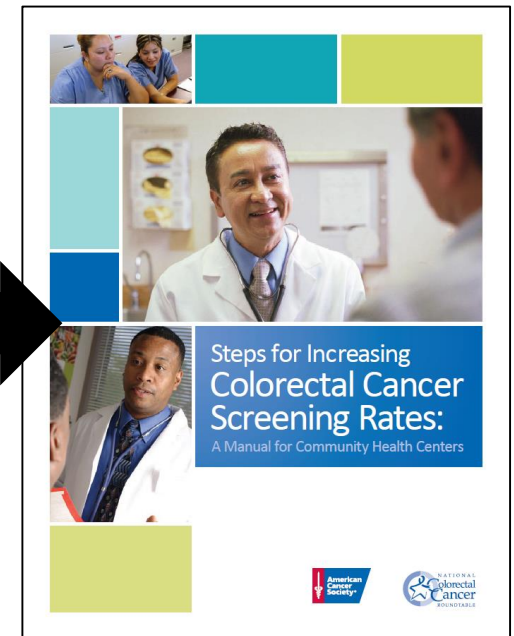
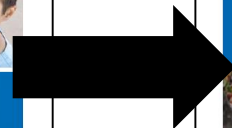
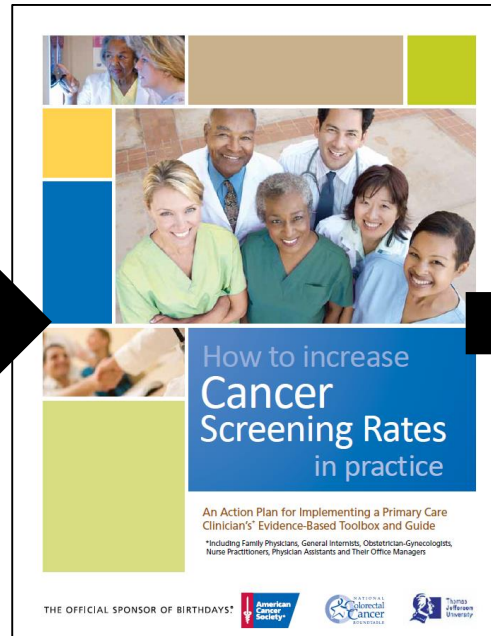
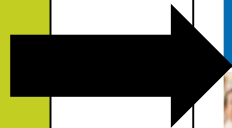
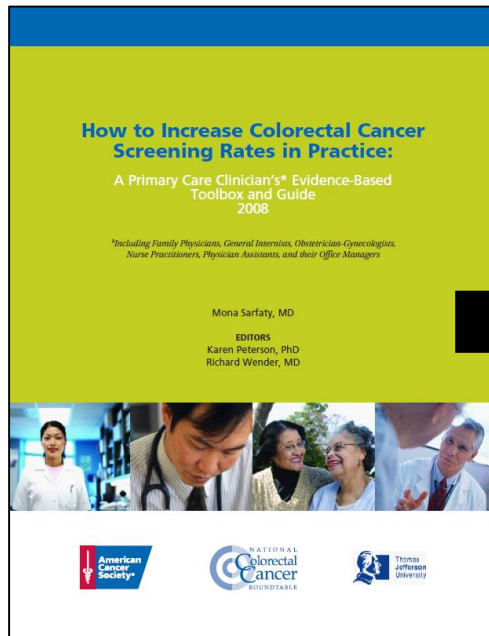




I have:

- A. Not seen the guide, but I'm excited to learn about it.
- B. Seen or shared the guide.
- C. Used the guide in a project to increase HPV vaccination.

# Building from NCCRT Success



**HPV**  
VACs



Steps for Increasing  
**HPV Vaccination**  
in Practice

An Action Guide to Implement Evidence-based Strategies for Clinicians\*

\*Includes pediatricians, family physicians, general internists, obstetrician-gynecologists, nurse practitioners, physician assistants, nurses, medical assistants, and their office managers

**HPV VACs**  
Vaccinate Adolescents against Cancers



# Steps for Increasing HPV Vaccination in Practice:

## An Action Guide to Implement Evidence-based Strategies for Clinicians

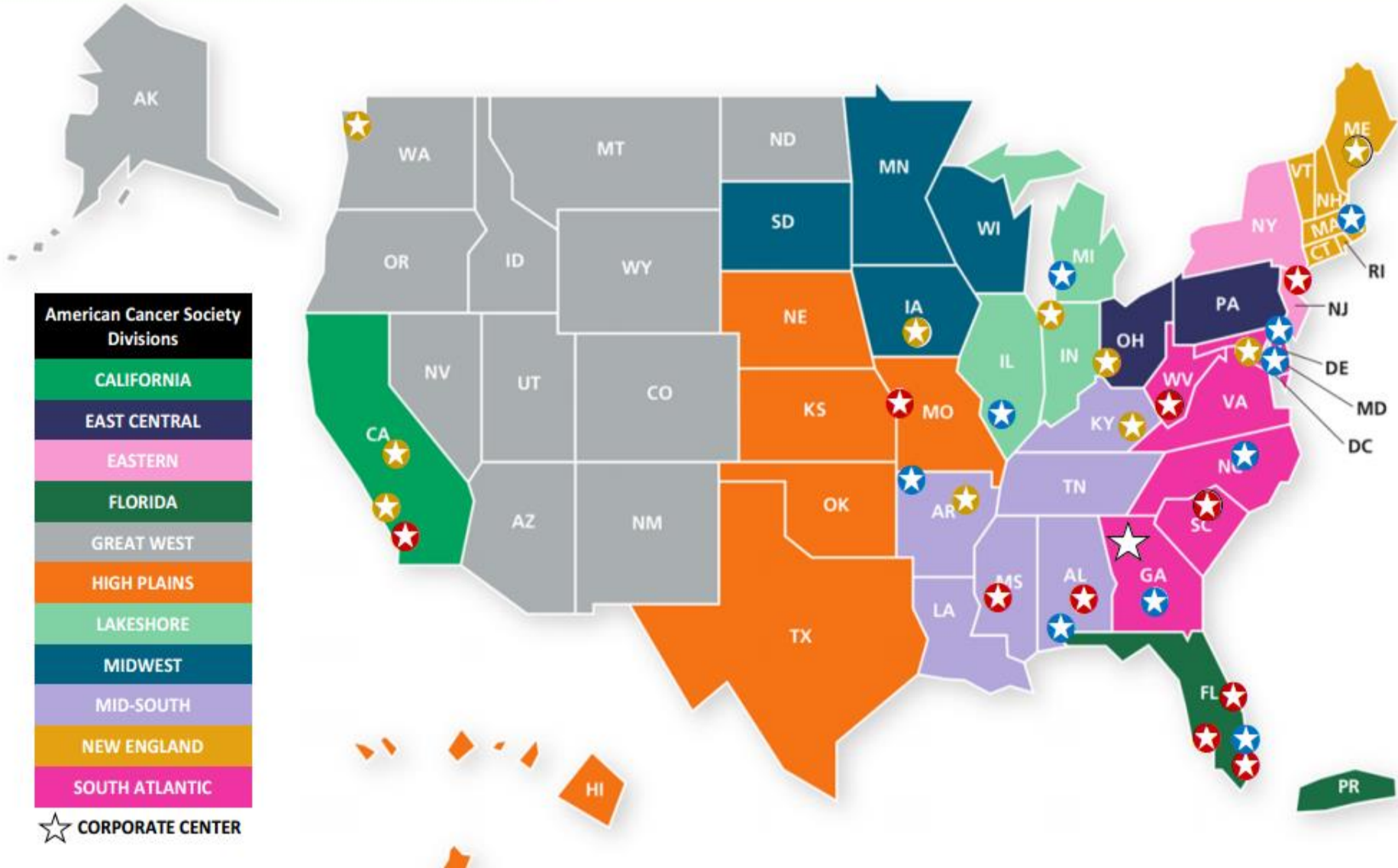
<http://bit.ly/HPVStepsActionGuide>

- Toolkit+
- Road map
- Portal to resources
- Launched June 2015
- Tested and improved by 30 FQHC Pilots

# HPV VACs

Vaccinate Adolescents against Cancers

## 2015-2016 FQHC Pilot Sites



## Saving Lives through Cancer Prevention

Nearly all cases of cervical cancer are caused by infection with high-risk types of human papilloma virus (HPV). The virus also has been linked to cancers of the vagina, vulva, anus, penis, and oropharynx (back of the throat). Each year in the US, an estimated 30,700 men and women will receive a diagnosis of cancer caused by HPV.<sup>1</sup> In addition to cancers, each year there are 330,000 women who undergo treatment for new cases of pre-cancerous, high-grade cervical dysplasia.<sup>2</sup>

**The HPV vaccine is cancer prevention.** It prevents infection by virus types that cause the vast majority of these cancers and genital warts. The vaccine is most effective when given before age 13 to achieve the best immune response, and it provides the most complete coverage against cancer-causing strains of HPV. That's why the American Cancer Society recommends that boys and girls get the HPV vaccine at age 11 or 12.

Despite the power of HPV vaccination to prevent cancers caused by HPV, in 2014, less than 40% of girls and boys had completed the three-dose series. Too many boys and girls in the US are not getting the HPV vaccine and are missing the protection it could provide.

**The biggest predictor of HPV vaccination uptake is an effective recommendation from a health care provider.** You have the power to make a lasting impact on HPV vaccination and help reduce the HPV-related cancer burden in your community. On the pages that follow, you will find detailed steps, evidence-based strategies, and tools for your clinic to increase HPV vaccination. In addition, follow the links provided in the Tools for Your Practice section of each step to access numerous valuable resources to support your practice's quality improvement efforts to increase HPV vaccination rates.

### Benefits to Your Health System Include:

- More patients who come into your clinic and leave vaccinated
- Parents who are motivated to get their child vaccinated against cancer
- Interventions that are evidence-based and, when used consistently, can improve overall vaccination rates
- Cancer prevention integrated into existing systems of care



1. Saslow, D., Andrews, K. S., Manassaram-Baptiste, D., Loomer, L., Lam, K. E., Fisher-Borne, M., Smith, R. A., Fontham, E. T. H. and on behalf of the American Cancer Society Guideline Development Group (2016). Human papillomavirus vaccination guideline update: American Cancer Society guideline endorsement. CA: A Cancer Journal for Clinicians. doi: 10.3322/caac.21355  
2. Schiffman M, Solomon D. Findings to date from the ASCUS-LSIL Triage Study (ALTS). Arch Pathol Lab Med. 2009;127:946-949.



### AMERICAN CANCER SOCIETY RECOMMENDATIONS

- Girls and boys should begin the HPV vaccine series at age 11 or 12. The vaccine can be given starting as early as age 9.
- Girls ages 13-26 and boys ages 13-21 who have not been vaccinated or who have not completed the series should get vaccinated. Men ages 22-26 may get the vaccine. Health care providers should inform men and women ages 22-26 that getting the HPV vaccine at older ages is less effective in lowering cancer risk.
- HPV vaccines are also recommended through age 26 for men who have sex with men and for women and men with weakened immune systems who did not get vaccinated previously or did not complete the vaccine series.
- Women who have been vaccinated should continue to follow cervical cancer screening recommendations.

Steps for Increasing HPV Vaccination in Practice | 1

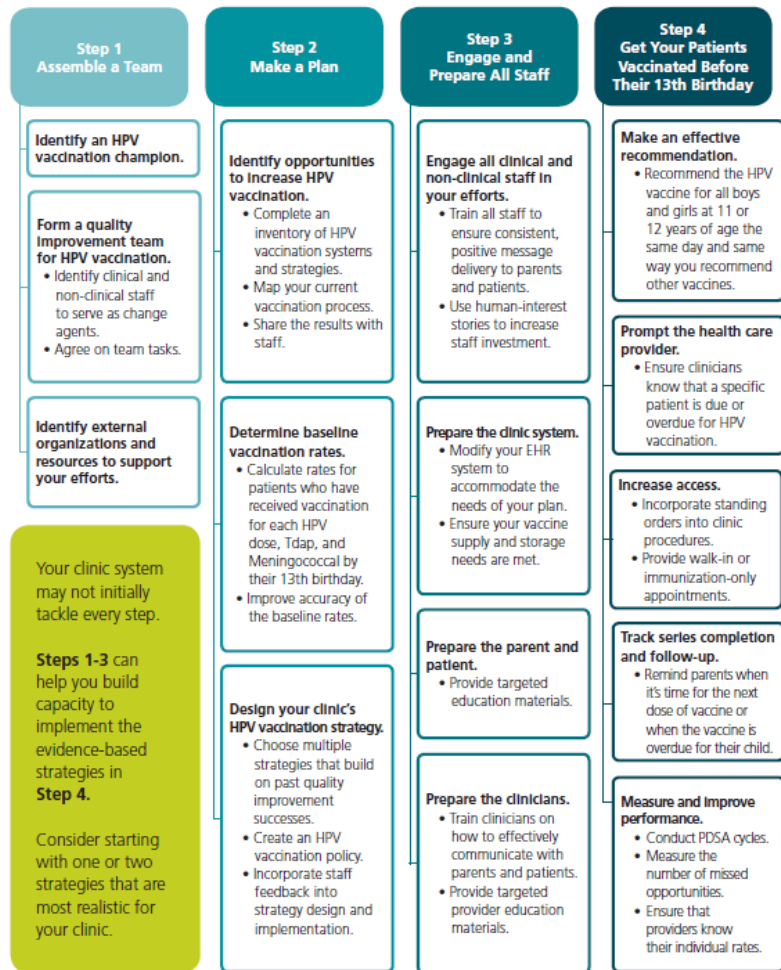
## Saving Lives through Cancer Prevention

- Why prioritize HPV vaccination
- Call to action
- American Cancer Society's Recommendations
- Benefits to using the guide



**Peninsula Community Health Services, WA** used this content to recruit staff to join QI team.

## Increasing HPV Vaccination: An Overview



Your clinic system may not initially tackle every step.

Steps 1-3 can help you build capacity to implement the evidence-based strategies in Step 4.

Consider starting with one or two strategies that are most realistic for your clinic.

## Increasing HPV Vaccination: An Overview

- What steps to take
- Where to start
- Foundation of Quality Improvement

Steps 1-3 help build capacity to implement the evidence-based strategies in Step 4.

ARcare, AR checked off boxes as they were completed.





**WHAT:** Evidence-Based  
**Interventions**

**HOW:** Evidence-Based  
**Quality Improvement**



## Step 1: Assemble a Team

### Identify an HPV Vaccination Champion

Having an HPV vaccination clinic champion who advocates for practice change is an important component to the initiation and sustainability of efforts to increase HPV rates. This individual serves in a leadership role for the program and on the quality improvement (QI) team. They should be enthusiastic about the work, have the authority to implement practice changes, and have scheduled administrative time to guide the initiative. To ensure full coordination, consider having multiple champions (i.e., one medical and one administrative or one champion in each clinic location).

### Form a Quality Improvement Team for HPV Vaccination

A team-based approach to quality improvement is key for continued improvement. Members of a QI team focused on increasing HPV vaccination rates should represent different roles within the vaccination process. This group will be a driving force for practice change and continuous improvement. Successful QI teams:

- Meet regularly.
- Include clinical and non-clinical staff.
- Utilize the Model for Improvement and a PDSA (Plan-Do-Study-Act) process.
- Review rates and set benchmarks.
- Engage staff by regularly collecting feedback.
- Create and update office policies.

### Identify External Organizations and Resources to Support Your Efforts

The American Cancer Society, in addition to many other organizations, is committed to increasing HPV vaccination rates and has developed tools and resources to support your clinic's efforts. Consider the following external organizations and resources:

- The HPV VACs (Vaccinate Adolescents against Cancers) Project is a Society program with staff across the country working with federally qualified health centers and state partners to increase HPV vaccination rates.
- AFIX (Assessment, Feedback, Incentives, and eXchange) is a quality improvement program created by the Centers for Disease Control and Prevention where state Immunization Programs work with Vaccines for Children providers to raise general immunization rates.
- American Academy of Pediatrics, American Pediatric Association, Centers for Disease Control and Prevention, National AHEC Organization, and National Association of County and City Health Officials have specific HPV vaccination programs and may have initiatives within your community.
- Depending on your clinic and community, it may be important to engage school nurses and others who might initiate the three-dose series, but need your clinic to finish the series.

### Tools for Your Practice

Visit the Step 1 webpage to access downloadable quality improvement tools. This page includes links to Plan-Do-Study-Act templates, best practices in forming QI teams and utilizing immunization champions, as well as maps linking you to state and national HPV vaccination initiatives and resources.

<http://bit.ly/VACsStep1>

## Step 1: Assemble a Team

- Detailed explanation
- bit.ly provides portal printable and virtual resources



**Eau Claire Cooperative Health Centers, SC** recruited key external partners: state immunization, Merck and MCO to support project.



**Penobscot Community Health Care, ME** presented the steps and evidence slides in conjunction with You Are The Key slides.

**Step #1 Assemble a Team**

**Identify an HPV Vaccination Champion.**

**Identify External Organizations and Resources to Support Your Efforts.**

**Form a Quality Improvement Team for HPV Vaccination.**

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## Navigation

Resources and Education

# Step 1 - Assemble a Team

*Assembling a team is essential to increasing your clinic's HPV vaccination rates. Identify a HPV vaccination champion to advocate for practice change, and provide leadership on the quality improvement team. Form a quality improvement team that engages staff, reviews vaccination rates, and utilizes the Institute for Healthcare Improvement's Model for Improvement and PDSA processes. Identify external organizations and resources to bolster your clinic's efforts. Use these downloadable quality improvement tools to assist you during Step 1.*

### Identify an HPV Vaccination Champion

DocumentLink	Organization	Resource Description
<a href="#">Child and Adolescent Immunization Office Champions Project-Final Report</a>	American Academy of Family Physicians (AAFP)	Details how to develop and implement an Immunization Office Champions program designed to increase child and adolescent immunization rates in family physician practices.

### Form a Quality Improvement Team for HPV Vaccination

DocumentLink	Organization	Resource Description
<a href="#">Creating Quality Improvement Teams and QI Plans</a>	Agency for Healthcare Research and Quality (AHRQ)	Self-published article on how to create a QI team in a practice and who should be involved, key driver models, improvement plans for QI teams
<a href="#">Creating Capacity for Improvement in Primary Care: The Case for Developing a QI Infrastructure</a>	Agency for Healthcare Research and Quality (AHRQ)	Self-published article about Quality Improvement, QI capacity, and infrastructure



## Step 2: Make a Plan

A strategic plan is key for creating sustainable systems change. Once your plan is developed, document it and share it with everyone in your clinic.

### Identify Opportunities to Increase HPV Vaccination

Inventory your existing HPV vaccination policy and practices. A clear picture of existing systems allows you to identify strengths and the most impactful opportunities to increase rates. Process mapping is a proven tool to increase understanding of practice level process and identify opportunities for systems change.

Consider the following when conducting your inventory: Provider behaviors, electronic health record (EHR) system capabilities, patient flow, and staff capacity.

### Determine Vaccination Rates for Your Patients

Determining your baseline rates is critical to measuring practice improvement at the end of the implementation process. This requires a few steps:

1. Determine the best data sources: EHR, chart audit, and/or Immunization Information System (registry).
2. Determine the 12-month period for baseline.
3. Identify patients who turned 13 during the measurement year.
4. Identify the patients who have received vaccination for each HPV dose, Tdap, and Meningococcal by their 13th birthday.
5. Calculate your vaccination rates.

Take continuous steps to improve the accuracy of the clinic's baseline. Even after incorporating data from multiple sources, there will be patients who received HPV vaccine who are missing documentation. Establish a protocol for data entry and verification to ensure vaccination records are accurate.

### Design Your Clinic's Vaccination Strategy

Leverage your clinic's strengths when choosing the best approach to increase HPV vaccination rates. To maximize the impact of your efforts, choose multiple evidence-based interventions that build on past quality improvement successes. Create a policy with a standard course of action for HPV vaccination. Consider including the following when creating or updating your HPV vaccination policy:

- Assess vaccination status and recommend HPV vaccination at every opportunity.
- Follow an agreed upon vaccination schedule.
- Start using a vaccine refusal form, and recommend HPV vaccination again at future visits.

Document the clinic's HPV vaccination policy, share it with clinical and non-clinical staff, incorporate a regular collection of staff feedback, and check on adherence to the policy.



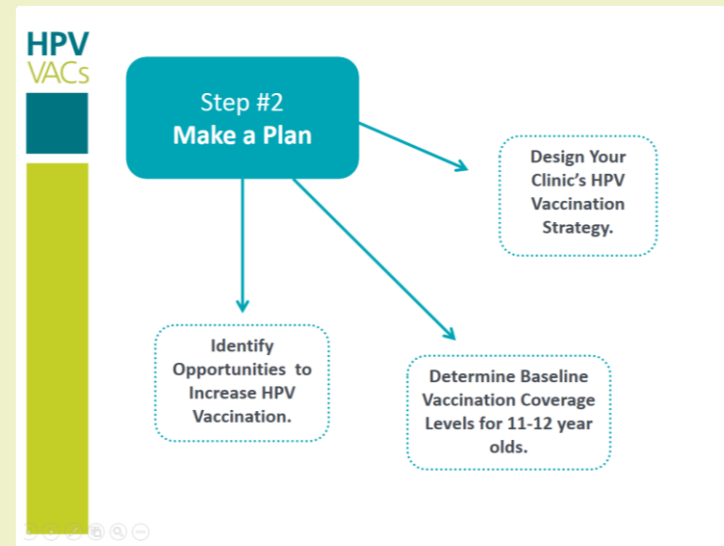
### Tools for Your Practice

Visit the Step 2 webpage to access downloadable tools and materials. This page includes adolescent vaccination schedules, vaccination refusal forms, and tools to help you determine patient vaccination rates. Inventory and map your practice systems, and choose an intervention that will be successful in your clinic setting.

<http://bit.ly/VACsStep2>

## Step 2: Make a Plan

- Leverage evidence to gain internal support



**Lincoln Community Health Center, NC** leveraged instructions to partner with state immunization registry on baseline.



## Step 3: Engage and Prepare All Staff

### Engage All Clinical and Non-clinical Staff in Your Efforts

Train all staff to ensure consistent positive message delivery to parents and patients. Even if a staff member is not directly engaged in the process of recommending or administering the HPV vaccine, they can potentially impact the process by delivering misinformation to patients and parents. Understand the HPV vaccine administrative schedule, insurance, and VFC regulations that may create administrative barriers.

Provide human-interest stories in addition to statistics to increase staff investment. A connection to a survivor of an HPV-related cancer is a powerful tool to overcoming negative perceptions of the vaccine. In addition to survivors and caregivers, oncologists are resources for providing powerful messages.

### Tools for Your Practice

Visit the Step 3 webpage to access downloadable staff engagement and training tools, including presentation slides, links to CME/CEU and webinar replays, videos of HPV cancer survivors, a database of survivor speakers, and effective parent and patient education tools.

<http://bit.ly/VACsStep3>

### Prepare the Clinic System

Modify your EHR system to ensure effective data collection and reporting. Your EHR system should track each dose of vaccine administered. When implementing new EHR functionality, training staff on how to enter and extract data is a key step. Regularly collecting feedback and sharing data with staff will prevent inaccurate data from being entered into the system.

Your efforts will increase the need for the vaccine and vaccine storage. Ensure you have adequate supply and storage for all HPV vaccine doses to prevent potential access barriers.

### Prepare the Parent and Patient

Decide on the parent and patient educational materials that are best suited for your clinic setting. Consider the following:

- Create an official procedure for how these materials are distributed and displayed. Incorporate this procedure into your HPV vaccination policy.
- Determine the clinical and non-clinical staff who will distribute the materials and at which point in the patient's office visit they will be distributed.

### Prepare the Clinicians

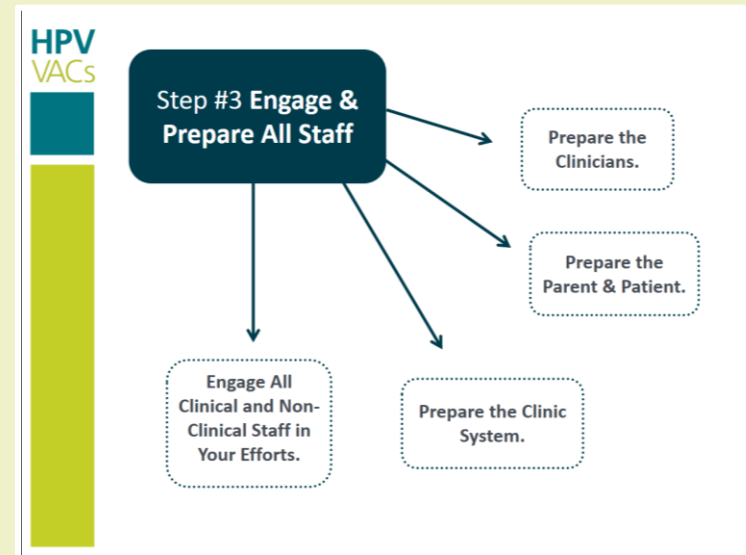
Provide clinician training through multiple formats. Consider the following when developing your training plan:

- Conduct on-site training opportunities to increase skills and team camaraderie.
- Incorporate provider-, clinic- and system-level data to make training content specific and relevant to your staff.
- Provide continuing medical education credits to motivate health care providers to complete training.
- Disseminate prerecorded webinars to add a flexible training option.
- Ensure key training topics are covered: how to make an effective recommendation using the bundled approach and evidence why the vaccine is best before a patient's 13th birthday.

In addition to training sessions, you can prepare your clinicians by incorporating HPV vaccination into your daily team huddle to ensure that the patients who arrive in your clinic leave vaccinated. This huddle time can be used to ensure logistical needs are met and all staff members are aware of their role in the vaccination reminder, recommendation, and administration process.

## Step 3: Make a Plan

- Highlights ALL staff



**North Hudson Community Action Corporation, NJ** held a **Someone You Love** viewing with all staff and then presented **You Are The Key** onsite with each center to allow more staff to attend a training.



## Step 4: Get Your Patients Vaccinated Before Their 13th Birthday

### Make an Effective Recommendation

A recommendation from a health care provider is the single most persuasive reason children get vaccinated. To increase the effectiveness of an HPV vaccine recommendation, consider the following:

- Recommend the HPV vaccine for all boys and girls at 11 or 12 years of age the same day, same way you recommend other vaccines.
- Try saying, *"Your child needs 3 vaccines today: Tdap, HPV, and meningococcal"* or *"Today your child should have 3 vaccines. They're designed to protect him from the cancers caused by HPV, meningitis, tetanus, diphtheria, and pertussis."*

### Prompt the Health Care Provider

Ensure clinicians know that a specific patient is due or overdue for HPV vaccination. Patient-specific prompts can come from your EHR, nursing staff, or both. Prompts can take many forms. Consider the following when developing your prompting system: EHR automatic popups, EHR visit task lists, highlighted text in EHR chart, sticky notes in chart, checklists, preprinted note in client's chart, or a highlighted current procedural terminology code on a visit summary.

### Increase Access

Assess the need for, and administer the HPV vaccine at every opportunity. Consider the following types of encounters: well child visits, sick visits, sports physicals, and nurse-only visits. Incorporate standing orders into clinic procedures. Provide walk-in or immunization-only appointments.

### Track Series Completion and Follow-up

Schedule follow-up appointments for the next doses before the patient leaves your clinic. Remind parents when it's time for the next doses of the vaccine or the vaccine is overdue for their child. Ensure your privacy statement includes: phone, mail, email, and text message as options for communication.

### Measure and Improve Performance

A program measures its success by demonstrating an improvement from baseline rates. Some programs have found it helpful to provide monthly reports for the clinic system, clinic, and individual health care providers with vaccination rates and data on missed opportunities. Systematically solicit feedback from staff, providers, and parents to refine and improve the impact of your efforts. Conducting PDSA cycles will streamline the implementation of a practice change into a strategy that meets the individual needs of a practice and providers.



### Tools for Your Practice

Visit the Step 4 webpage to access downloadable strategy implementation tools. This page includes resources for making an effective HPV vaccine recommendation, sample standing orders, parent reminder templates, sample HPV vaccination PDSA cycles, and tools for provider-, clinic-, and system-level data.

<http://bit.ly/VACsStep4>

# Step 4: Get Your Patients Vaccinated Before Their 13<sup>th</sup> Birthday

- The evidence-based strategies
- Make an Effective Recommendation + Measure and Improve Performance



**Health Services Incorporated, AL** did it all, but not all at once.

# Key Success Using the Guide

**HPV VACs**

Vaccinate Adolescents against Cancers







Steps for Increasing  
**HPV Vaccination**  
in Practice

An Action Guide to Implement Evidence-based Strategies for Clinicians\*

\*Includes pediatricians, family physicians, general internists, obstetrician-gynecologists, nurse practitioners, physician assistants, nurses, medical assistants, and their office managers

**HPV VACs**  
Vaccinate Adolescents against Cancers



Steps for Increasing HPV  
Vaccination in Practice:  
An Action Guide to Implement  
Evidence-based Strategies for  
Clinicians

How will you use,  
enhance and/or  
disseminate the  
guide?

[ACS.HPV.VACs@cancer.org](mailto:ACS.HPV.VACs@cancer.org)

<http://bit.ly/HPVStepsActionGuide>

**HPV VACs**

Vaccinate Adolescents against Cancers

