71272GPeducation_03: Intervention Tools

1) Immunization report card used during both in person and webinar arms of the intervention, delivered by state immunization coordinators to providers in study clinics (as per protocol) to provide feedback on immunization rates (page 2)

2) Email coaching messages used as part of study intervention protocol formatted to be faxable, sent by study sate partners to participating providers at regular intervals during the study (as per the study protocol) (pages 3-16)

3) Email templates for coaching messages used by study state partners to send educational coaching messages to participating providers. Developed as part of study protocol and sent via email to state partners for their use (pages 17-21)

YOUR IMMUNIZATION REPORT CARD

REVIEW

your clinic's adolescent vaccine coverage.

Your clinic	HPV		Meningococcal,	
has	Males, ≥1 dose	Females, ≥1 dose	≥1 dose	Тдар
patients, age 11-12	%	%	%	%
patients, age 13-17	%	%	%	%

Coverage estimates are for patients in our state's immunization registry.

2 SET A GOAL to improve HPV vaccine coverage in the next 6 months.

HPV Goal	Progress at 3 months	Progress at 6 months
patients, age 11-12		
patients, age 13-17		

Goals represent 10% of male and female patients in your clinic with records in our state's immunization registry. A typical clinic may give the first dose of HPV vaccine to 5% of their adolescent patients in 6 months. The goal is to double this rate.

RECOMMEND HPV vaccination for adolescents, starting at age 11.

Offer HPV vaccine in the same direct way you recommend other vaccines. Try saying:

"Your child needs three shots today: meningitis, HPV, and Tdap vaccines."

Your recommendation is the single biggest influence on parents' decisions to get HPV vaccine for their children. The vaccine produces a better immune response in younger adolescents. Vaccinating in the preteen years is best.

EARN FREE CMEs on HPV vaccine communication: www.cdc.gov/vaccines/ed/hpv/



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For all vaccine providers and staff! Please distribute or post.



Tips for recommending HPV vaccine

Q: What's the biggest influence on parents' decision making about HPV vaccination?

A: A healthcare provider's recommendation

But, too often, we don't give effective recommendations for HPV vaccination.

Try saying: "Your child is due for three shots today: the Tdap, HPV, and meningitis vaccines. With your okay, we'll give these vaccines at the end of the visit."

Tips for making **effective HPV recommendations**:

☑ Start early. Patients should get HPV vaccine at age 11 or 12.

 \blacksquare Be brief and direct.

☑ Treat HPV vaccine like other adolescent vaccines.

To support ongoing efforts to raise HPV vaccination coverage, please review additional tips for recommending HPV vaccine on the **Tips and Timesavers sheet**.

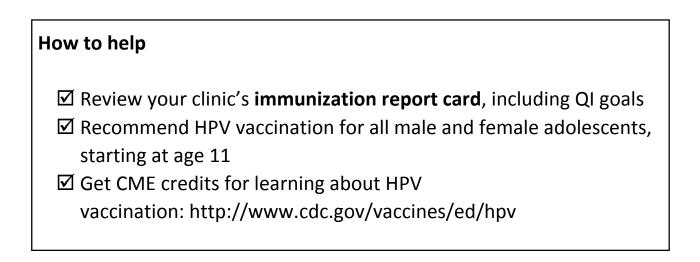
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For all vaccine providers and staff! Please distribute or post.

Your HPV Vaccination QI Project

Your clinic recently committed to increasing HPV vaccination coverage. A representative from your clinic will lead an immunization quality improvement (QI) project with the Washington State Health Department over the next six months.

To meet your QI goal, we need the help of all clinicians and staff.



Look for 3 and 6 month updates to track your improvement. If you have any questions, please get in touch with Nicole Pender at the Washington State Department of Health or your clinic's project leader. Good luck!

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For all vaccine providers and staff! Please distribute or post.

Your 3-month Immunization QI Report Card

Your clinic's HPV vaccine coverage is improving, but it's not currently on track to meet your QI goal. However, you still have time!

Take a minute to review your clinic's immunization report card, and then renew your quality improvement efforts to ensure that you meet your goal.

How to Help
 Recommend HPV vaccination for all male and female adolescents, starting at age 11. Get CME credits for learning about HPV vaccination. http://www.cdc.gov/vaccines/ed/hpv http://www.medscape.org/viewarticle/826415 http://www.medscape.org/viewarticle/827912

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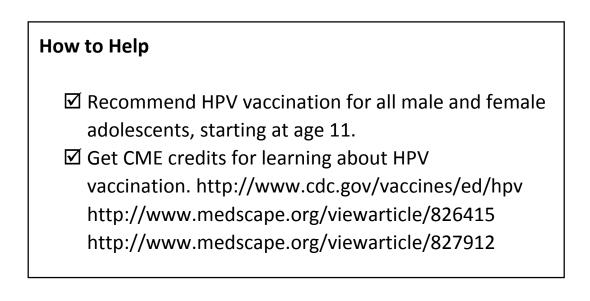
For all vaccine providers and staff!

Please distribute or post.

Your 3-month Immunization QI Report Card

Congratulations! Your clinic is making good progress toward improving HPV vaccine coverage.

We encourage you to build on this success. Take a minute to review your clinic's immunization report card and keep up the good work to ensure that you meet your goal.



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For all vaccine providers and staff!

Please distribute or post.

Addressing Concerns about HPV vaccination

Parents have a variety of reasons for not getting the HPV vaccine for their children. The most common reasons are not getting a provider's recommendation, not having enough information, believing the vaccine is not needed, and concerns about safety or side effects.

Strategies for addressing parents' concerns

☑ Find common ground. Try saying:

"HPV vaccine has gotten a lot of media attention, so I can understand why you have concerns."

 \square Give the evidence. Try saying:

"Of all the medications I prescribe, vaccines are among the safest. HPV vaccine has been studied extensively and has not been linked to serious side effects."

☑ Provide a strong recommendation. Try saying:

"HPV vaccine prevents cancer, and it's something I recommend strongly for all my 11- to 12-year-old patients."

Use CDC's educational materials, like the **Parent Tip Sheet**, with families who raise questions about HPV vaccination.

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For all vaccine providers and staff!

Please distribute or post.

Your 6-month Immunization QI Report Card

Congratulations! Your clinic has met its QI goals for increasing HPV vaccination.

In a 6-month period, you've succeeded in vaccinating twice as many adolescents as the typical clinic.

How to Keep Improving

☑ Recommend HPV vaccination for all male and female adolescents, starting at age 11.

☑ Get CME credits for learning about HPV vaccination.

http://www.cdc.gov/vaccines/ed/hpv

Thank you for your participation. The Washington State Department of Health looks forward to partnering with you again in the future.

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For all vaccine providers and staff!

Please distribute or post.

Your 6-month Immunization QI Report Card

Although HPV vaccination coverage in your clinic has improved, you have not yet met your six month goal.

We encourage you to continue working to improve by experimenting with different strategies for supporting HVP vaccination in your clinic. Remember that quality improvement is as ongoing process and requires trial and error. You may need several QI cycles to find a strategy that works, so don't give up.

How to Keep Improving

- ☑ Recommend HPV vaccination for all male and female adolescents, starting at age 11.
- ☑ Get CME credits for learning about HPV vaccination.
 - http://www.cdc.gov/vaccines/ed/hpv

Thank you for your participation. We look forward to partnering with you again in the future.

Email coaching messages

1. Report card (1 week post-intervention)

Subject: Immunization Report Card for [clinic name]

Your QI Project to improve HPV vaccination

Last week, your clinic committed to increasing HPV vaccine coverage. Over the next 6 months, a representative from your clinic will conduct an immunization quality improvement (QI) project in partnership with the [Health Department Name]. To meet your QI goal, we need the help of all clinicians and staff.

How to help

To support these QI efforts, please take a moment now to:

- 1. Review your clinic's immunization report card, including QI goals (attached).
- 2. Recommend HPV vaccination for all male and female adolescents, starting at age 11.
- 3. Get CME credits for learning about HPV vaccination. http://www.cdc.gov/vaccines/ed/hpv/

Rationale

Increasing your HPV vaccine coverage will help protect your patients against HPV-related cancers. Immunization QI also helps you to:

- Follow AAP and AAFP practice guidelines
- Prepare for a new HEDIS measure of HPV vaccine coverage
- Fulfill QI requirements toward PCMH certification

Look for email updates in 3 and 6 months to track your improvement. If you have questions, please get in touch with me or your clinic's project leader. Good luck!

[Name] [Contact information]

2. Provider recommendations (1 month post-intervention)

Subject: Recommending HPV vaccine

Tips for recommending HPV vaccine

What's the single biggest influence on parents' decision-making about HPV vaccination? A healthcare provider's recommendation. Unfortunately, we often miss opportunities to deliver strong recommendations for HPV vaccine. Here are tips for making effective recommendations:

- Start early. Patients should get HPV vaccine at age 11 or 12.
- Be brief and direct.
- Treat HPV vaccine like other adolescent vaccines.

Try saying: "Your child is due for three shots today: HPV vaccine, Tdap vaccine and meningitis vaccine. With your okay, we'll give these vaccines at the end of the visit."

How to help

The [Health Department Name] is partnering with your clinic to raise HPV vaccine coverage. To support ongoing QI efforts, please review additional tips for recommending HPV vaccine (attached).

With 5 months to go, you still have plenty of time to meet your clinic's QI goal. Keep going!

3. Parent concerns (3 months post-intervention)

Subject: Addressing concerns about HPV vaccine

Addressing concerns about HPV vaccine

Parents report a variety of reasons for not getting HPV vaccine for their adolescent children. The most common reasons are: not getting a providers' recommendation, not having enough information, believing the vaccine is not needed, and concerns about safety or side effects.

Strategies for addressing concerns:

- Find common ground: "HPV vaccine has gotten a lot of media attention, so I can understand why you have concerns."
- Give the evidence: "Of all the medications I prescribe, vaccines are among the safest. HPV vaccine has been studied extensively and has not been linked to serious side-effects."
- Provide a strong recommendation: "HPV vaccine prevents cancer, and it's something I recommend strongly for all my 11- to 12-year-old patients."

How to help

The [State Health Department Name] is partnering with your clinic to raise HPV vaccine coverage. To support ongoing QI efforts, use CDC's educational materials with families who raise questions about HPV vaccination (attached).

Next month, you will receive your clinic's 3-month progress report. Let's make this month count!

4. 3-month report (3 months post-intervention)

Subject: Immunization QI 3-month report

Immunization QI: 3-month report

[For clinics with ≥50% of goal patients vaccinated]

Congratulations! As you will see from the attached report, you are making good progress toward your goal to improve HPV vaccine coverage in your clinic. We encourage you to build on this success. Keep up the good work to ensure that you meet your 6-month goal.

[For clinics with <50% of their goal patients vaccinated]

The attached 3-month report shows your progress toward improving HPV vaccine coverage in your clinic. Although coverage is improving, your clinic is not currently on track to meet your QI goal. However, there is still time. Renew your quality improvement efforts to ensure that you meet your 6-month goal.

How to help

The [State Health Department Name] is partnering with your clinic to raise HPV vaccine coverage. To support ongoing QI efforts, you can:

- 1. Recommend HPV vaccination for all male and female adolescents, starting at age 11.
- 2. Get CME credits for learning about HPV vaccination. <u>http://www.cdc.gov/vaccines/ed/hpv/</u> <u>http://www.medscape.org/viewarticle/826415</u> <u>http://www.medscape.org/viewarticle/827912</u>

We're now at the project's half-way mark, and this is a great time to renew your commitment to increasing HPV vaccination.

5. 6-month report (6 months post-intervention)

Subject: Immunization QI 6-month report

Immunization QI: 6-month report

[For clinics meeting their vaccination goals]

Congratulations! As you will see from the attached report, you have met the QI goals you set for increasing HPV vaccination in your clinic. In a 6-month period, you've succeeding in vaccinating twice as many adolescents as the typical clinic. You can expect this effort to translate into higher clinic coverage.

[For clinics not meeting their vaccination goals]

The attached report shows your progress toward improving HPV vaccine coverage in your clinic. Although coverage has improved, you have not yet met your goal. We encourage you to continue working to improve by experimenting with different strategies for supporting HPV vaccination in your clinic. Remember that quality improvement is an ongoing process and requires trial and error. You may need several QI cycles to find a strategy that works, so don't give up.

[For all clinics]

How to keep improving

Over the last 6 months, the [State Health Department Name] has partnered with your clinic on a project to raise HPV vaccine coverage. To support QI efforts, you can:

- 1. Recommend HPV vaccination for all male and female adolescents, starting at age 11.
- Get CME credits for learning about HPV vaccination. http://www.cdc.gov/vaccines/ed/hpv/

Thank you for your participation. We look forward to partnering with you again in the future.