

Quality Improvement for HPV vaccination

Adolescent AFIX –

*Used by state vaccine coordinators in webinar
intervention for primary care providers*



What is AFIX?

Assess your clinic's vaccination coverage

Feedback and goal setting

Incentives for improvement

eXchange of information



Your immunization program

- What's your clinic's approach?
- What are your strengths in this area?
- What challenges do you face?

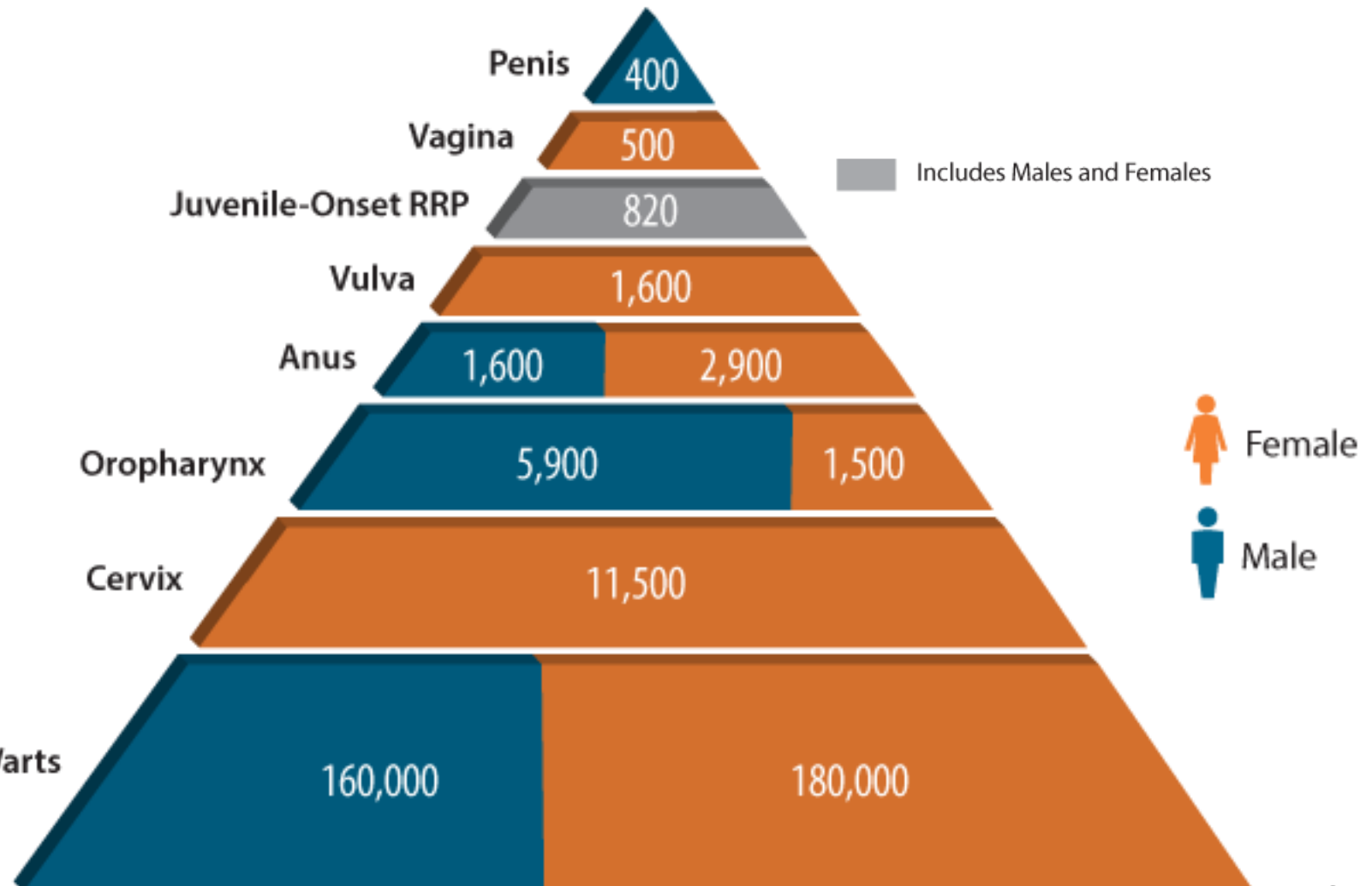
Why focus on HPV vaccination?

HPV is very common

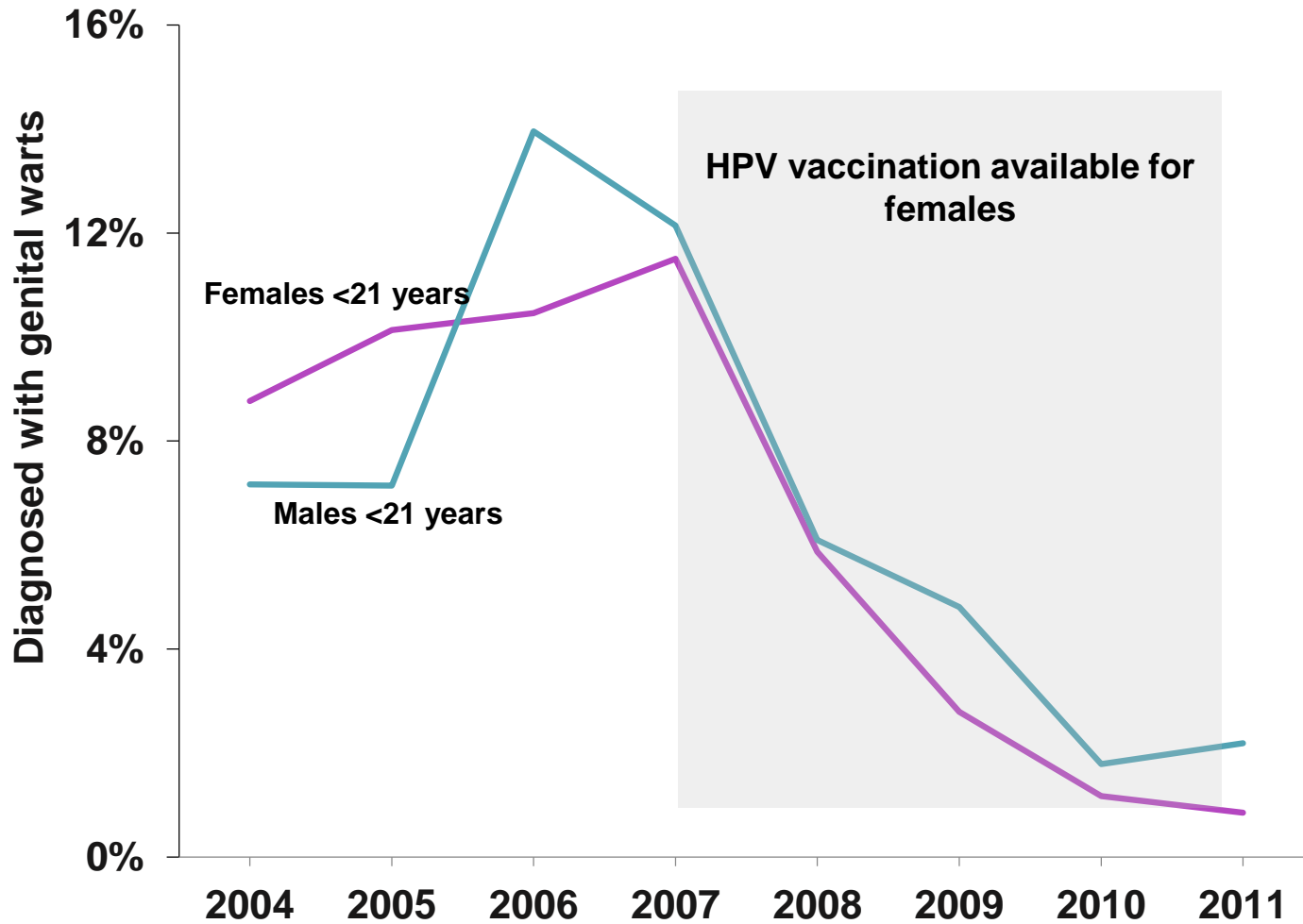
- Most people will be infected with HPV at some point in their lives. In fact, 3 out of 4 sexually transmitted infections in the US are from HPV.
- Young people are at high risk.
- One-third of older adolescent girls carry the virus at any given time.

Consequences of HPV are serious

Numbers of Cancers and Genital Warts in the US caused by HPV



HPV vaccination is effective and safe



HPV vaccination guidelines

Routine administration

- Males and females, ages 11-12

Catch up

- Males to age 21
- Females to age 26

Concurrent vaccinations

- Tetanus, diphtheria, pertussis (Tdap)
- Meningococcal vaccine

9-valent vaccine

Updates

- ACIP approved, same guidelines as HPV4
- Insurance and VFC coverage issues should resolve in next year
- Complete the series with available vaccine

Advise parents to avoid delaying protection

HPV9 is “improved,” not “new”

Measurement and Goal Setting

Your immunization report card

- Review coverage estimates for your clinic's adolescent patients.
- Remember that 80% coverage is the national goal for all three adolescent vaccines.
- HPV vaccination coverage is especially important.

YOUR IMMUNIZATION REPORT CARD

1 REVIEW your clinic's adolescent vaccine coverage.

Your clinic has...	HPV		Meningococcal, ≥1 dose	Tdap
	Males, ≥1 dose	Females, ≥1 dose		
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 50% 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.

3 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/

Developed by Melissa Gibney, PhD, UNC, ggibney@email.unc.edu

Your 10% HPV vaccination goal

Research shows that in a six month period, a typical clinic will deliver the first dose of HPV vaccine to only about 5% of all 11- to 12- year old patients in their practice.

We think you can double that rate to 10%!



Step 4

Strategies for quality improvement

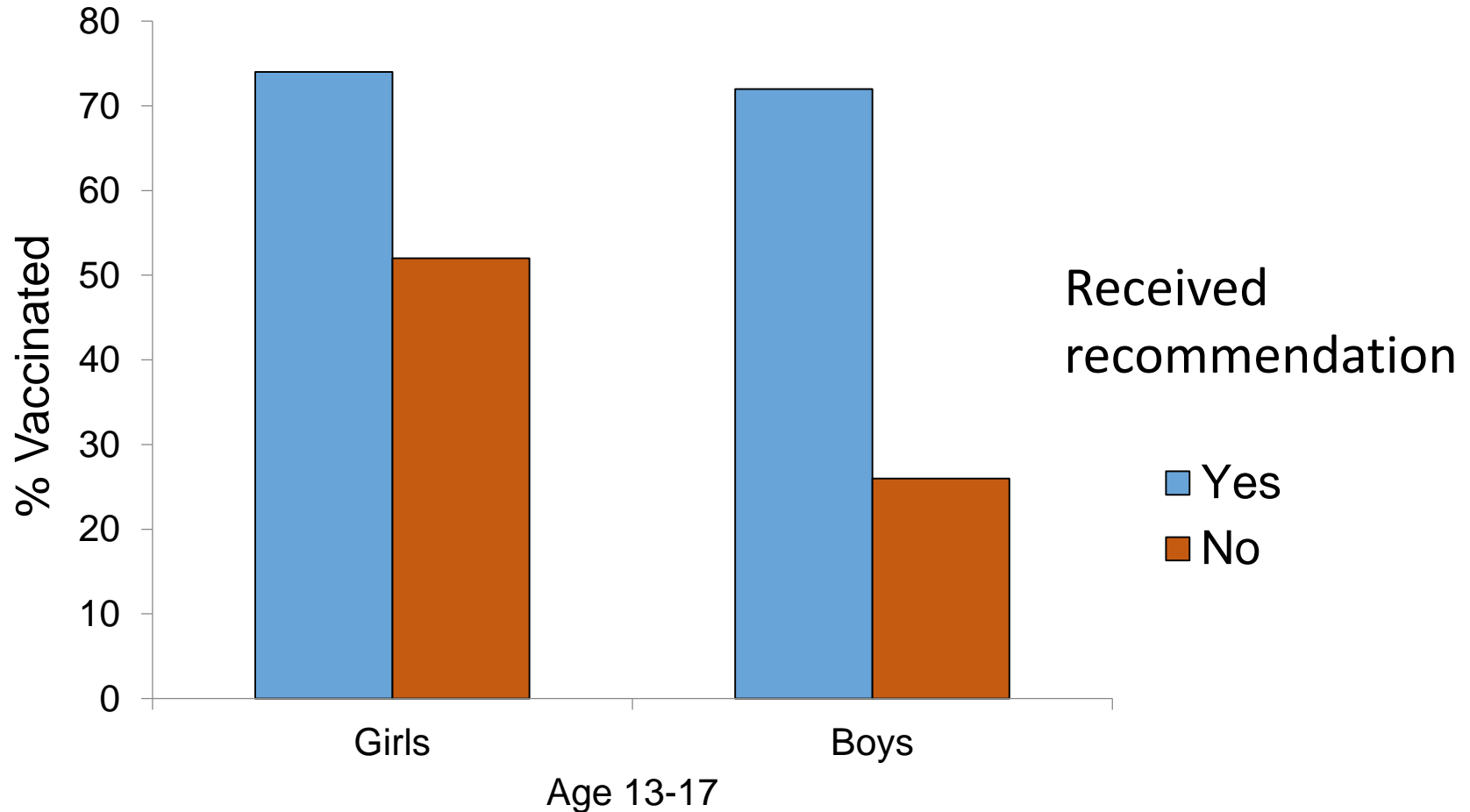
Primary Goal

Make a **strong recommendation** for HPV vaccination to patients and parents, starting at age 11

Secondary Goal

Reduce missed opportunities for HPV vaccination

Your recommendation has a BIG impact



Brief is more effective

Announce the child needs **three** vaccines, and encourage **same day** vaccination.

Try this: “Your child is due for meningitis, HPV, and Tdap vaccines. The nurse can give them at the end of the visit. Do you have any questions?”

For hesitant parents, say you **strongly recommend** getting the vaccines today.

Your QI action plan

Primary strategy

- Share HPV vaccination coverage estimates
- Discuss giving strong HPV vaccination recommendations

Secondary strategy

- Review CDC guidelines
- Train front desk staff
- Encourage physicians to sign standing orders
- Give educational materials to parents

Communication plan

- Share hard copies of Immunization Report Card
- Deliver a presentation during a staff meeting
- Provide e-mail addresses to state vaccination specialist

HPV Vaccination Quality Improvement ACTION PLAN

PRIMARY QI STRATEGY

Goal: Deliver strong recommendations for HPV vaccination for all patients, starting at age 11.

- Share HPV vaccine coverage estimates with all immunization staff.
- Discuss the need to improve HPV vaccine coverage through provider recommendations.

SECONDARY QI STRATEGY (choose one or more)

Goal: Reduce missed opportunities for HPV vaccination.

- Review CDC guidelines for HPV vaccination with all immunization staff, including the importance of concomitant vaccination.
- Train front desk staff on how to schedule appointments to support HPV vaccination.
- Sign standing orders for HPV vaccination.
- Provide informational materials on HPV vaccination to support parent and patient decision-making.
- Other _____

COMMUNICATION PLAN

- Share hard copies of Immunization Report Card.
- Deliver a brief presentation about this QI project during a regular staff meeting.
- Provide e-mail addresses of vaccine providers and office staff to receive periodic program updates.
- Other _____

Next Steps

What's next?

Email progress reports on QI goal

- 3 months from now
- 6 months from now

Email coaching resources

Follow-up surveys

- Today
- 6 months from now



Questions? Contact us.

<Name state vacc. specialist>

<Contact information>

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