

HPV Vaccination Programs in the Community:

# Championing HPV Vaccination in a Rural Community

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# Championing HPV Vaccination in a Rural Community

## ▶ **Agenda:**

- Introductions
- HPV Vaccine Champion
- Vaccine Hesitancy
- Strategies
  - Long term
  - Short term
  - Leveraging State and National Efforts
- Tying It All Together!



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### ◦ **Introductions**

- **Seaford, Delaware**

- **Nemours Children's Health System**

- HPV Vaccine Champion

- Vaccine Hesitancy

- Strategies

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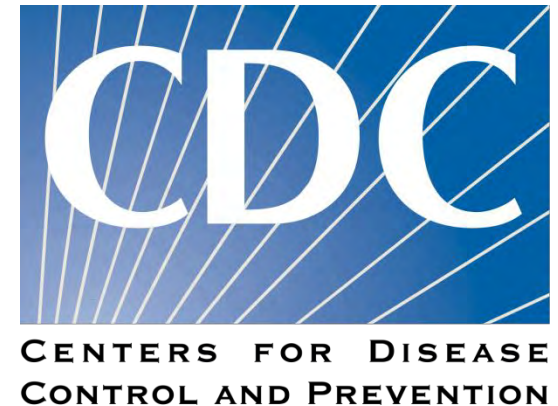
**Nemours.** Alfred I. duPont  
Hospital for Children



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- ▶ CDC's "HPV Vaccine Is Cancer Prevention" Champion
- ▶ Nominee must treat adolescents
- ▶ Minimum vaccination coverage of 60% series completion
- ▶ Must also exhibit either:
  - Leadership in their community or medical system
  - Collaboration or Innovation
- ▶ Nemours/Shibley treats approximately 2500 patients
- ▶ HVP completion rate is between 80% & 88%
- ▶ We have taken a leadership role within our medical system to improve access to HPV vaccination and stress a focus on preventative care

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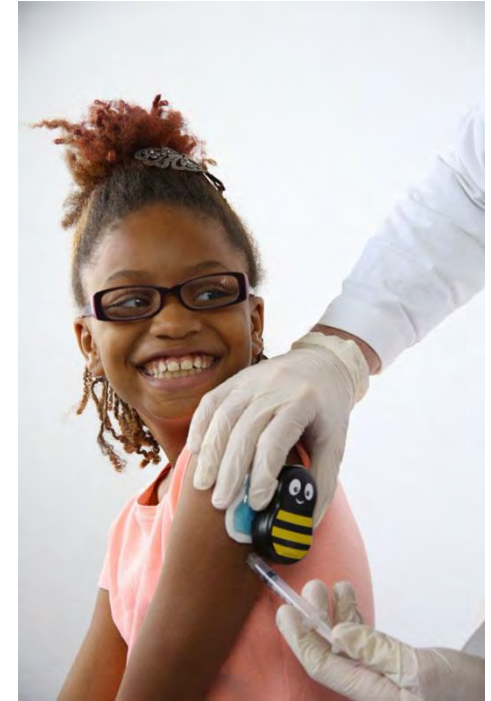
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- ▶ **Vaccine hesitancy** is ranked as one of the top 10 health threats in the world for 2019 by the **World Health Organization**
- ▶ **Parents:**
  - Social media
    - Organized: Anti-vaccine propaganda has outpaced pro-vaccine public health information
    - CDC has a website with accurate information, but no loud public voice
    - Aggressive political arm with more than a dozen political action committees
  - Reluctance to discuss human sexuality with their children
- ▶ **Children:**
  - Needle phobia
- ▶ **Staff:**
  - Needle phobia
  - Time management

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## ▶ Long term:

- **Pain management** starts in infancy by teaching parents how to minimize pain and promote soothing
- This contributes to **reducing needle phobia** by parents and children
- Use of pain blocking devices like a “**shot blocker**”
- **Schedule annual well visits** a year in advance
- Present your **Vaccine Policy** to all new patients
  - Separate visits are required for non-vaccinated children
- **Open discussions** with parents regarding vaccines at every opportunity
  - **LISTENING** to concerns
  - **Admit past mistakes** (remember vaccines for Lyme Disease and Rotavirus?)
  - Talk about strategies for new vaccines: “a **two year break-in period** once available”
- Utilize the EHR: Epic shows “**Gaps In Care**”

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## ▶ **Short term:**

- **Sandwich** the HPV9 between Tdap and MCV4
- Discuss the **basic premise of vaccinating** before high risk ages or behaviors
- **Don't Ask... Tell!** Remember you are the expert. Parents, like children respond more positively when there is confidence behind a recommendation.

## ▶ **Staff:**

- **Staff education**
- Organize **vaccine ordering** and coordination administration **workflows**
- **Cross Campus Discussion:** Primary Care, Infectious Disease and Administration
- **Value Based Care:** Tracking vaccine rates internally, calling patients back when gaps are identified & internally publishing vaccination rates by site

## ▶ **State and National Efforts:**

- **Medical Society of Delaware:** annual Healthy Child talks to all 7<sup>th</sup> Graders
- **National advertising:** powerful commercial for HPV “Mom did you know?”

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## ◦ **Tying It All Together!**



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- ▶ **Pain Management**
- ▶ **Ongoing Vaccine Discussions**
- ▶ **Annual Visits**
- ▶ **Vaccine Policy**
- ▶ **EMR “Gaps In Care”**
- ▶ **Institutional Support**
- ▶ **Staff Education**
- ▶ **State & National Advertising**
- ▶ **“Don’t Ask... Tell!”**



Alfred I. duPont  
Hospital for Children