

PROMISING PRACTICES FOR ADOLESCENT VACCINATION DURING COVID-19

Insights from Key Vaccination Stakeholders



CONVENING TO FIND INNOVATIONS

In July 2020, the National HPV Vaccination Roundtable hosted two webinars to engage health systems and public health immunizers in small group discussions. Given the significant negative impact of COVID-19 on adolescent immunization rates, we sought to solicit and share promising practices from the field.

Stakeholders' collective wisdom is summarized here with the hope of getting adolescent immunization back on track during the pandemic. To learn more, visit www.hpvrtable.org/health-systems.

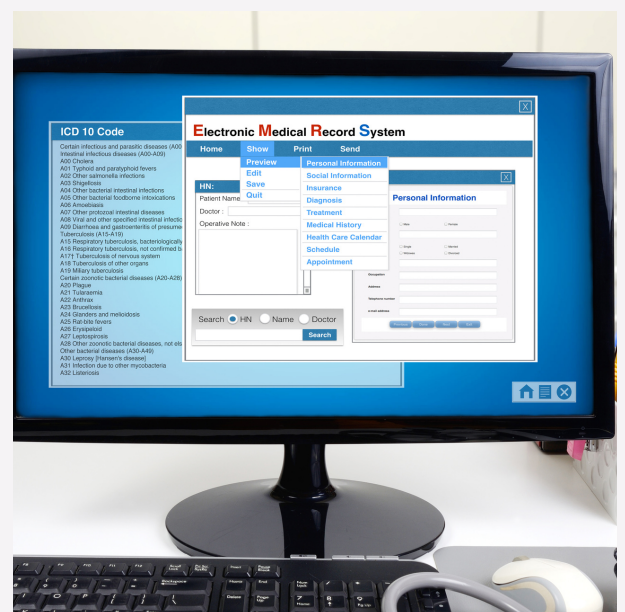


OPTIMIZING PATIENT DATA

- Make lists of patients who are up to date with well-child visits but overdue for vaccines, and vice versa:
 - Use state registry data (also known as IIS) to pull alert lists/reports, and determine who needs to come back.
 - Use electronic health records (EHR) to run alert lists/reports, and contact all patients due or overdue.
 - Pull lists of adolescents who have not been seen for a year.
- Clean up the IIS by comparing patient lists with the EHR and determine who are the actual patients.
- Run quality metrics reports and filter by vaccination status, age, visit dates, provider, etc.
- Work with a texting vendor to get data regarding who comes into the office.
- Share data across sites in a system to motivate individual sites to make improvements.
- Work with a health services researcher in the office to target performance improvements.



RUN QUALITY METRICS REPORTS AND FILTER BY VACCINATION STATUS, AGE, VISIT DATES, PROVIDER, ETC.



REMINDING & SCHEDULING PATIENTS

- Reach out to adolescents who are due or overdue for immunizations, and emphasize COVID-19 safety practices in the office.
- Contact families using emails, letters, postcards, phone calls, and text messages.
- Develop reminder systems through the patient portal to communicate more easily.
- Utilize pre-visit planning and medical assistants to make patients aware of the vaccines that are due.
- Have a vaccine coordinator make reminder calls, handle follow-ups, and reference the state registry.
- Correlate outreach to patient actions. Prioritize outreach mechanisms based on how well actions result in follow-through from patients.
 - The EHR is a useful tool for generating lists on clinic and provider levels.
- Access ACS co-branded reminder postcards at <https://brandtoolkit.cancer.org/BMS/category/browse.cfm?category=3518>.
- Have a designated screener or vaccine navigator answer patient questions out of a call center.
- Provide pre-visit documents to be filled out in advance online.



At an Iowa health system, the staff worked with the EHR to embed vaccination “tasks” as pop-up reminders.

After patients come in for the vaccine, they are given a co-branded flyer to take to the front desk to immediately schedule a second dose. Series completion has become a primary goal of the health system.

Some clinics have extended their hours to include certain evenings and weekends to combat backlog for all visits.

They sent emails and letters to all families, encouraging patients to come in before a potential second wave.

They also hosted a Facebook Live session in which two physicians explained the importance of bringing children in for HPV vaccination.

PATIENT OUTREACH

- Encourage patients to come in *now*.
- Create outreach flyers in multiple languages expressing the need for immunizations and well-child visits appropriate for your community; have community leaders/partners amplify these messages.
- Host an HPV Vaccine Week campaign; provide messaging that encourages parents to include HPV vaccination in their school preparation.
- Create social media posts for partner organizations to distribute.
- Frame the HPV vaccine as cancer prevention, especially when working with faith-based health centers or communities.
- Host on-site vaccination events for adolescents and their siblings, where staff can conduct physicals, assess for immunization status, and administer vaccines.
- Take health equity into account. In some communities, Black patients have been less likely to have a well-visit. Strategies should be in place for outreach efforts.
- Conduct Facebook Live events where physicians can explain the importance of getting children in for vaccinations. Have a panel of experts present. Facilitate a Q & A to address misconceptions. Record and post the event.
- Use billboards to promote clinic safety and encourage patients to come in for visits.



LOUISIANA:

IN CONJUNCTION WITH THE NATIONAL AAP LETTER, LA DEPT. OF HEALTH SENT LETTERS TO ALL PROVIDERS ENCOURAGING THEM TO SEE PATIENTS AND GET THEM UP TO DATE ON IMMUNIZATIONS



STAFF EDUCATION

- Use webinars to educate large audiences, whether it be office staff, outside organizations, or patients.
- Have an immunization/physician champion in the office who can do promotion and education work.
- Include all office staff, including reception, in training programs to get them on the same page/message on cancer prevention.
- Invite an HPV cancer survivor to talk to the staff or show a video (especially to those who are pushing back against vaccination).
- Train providers on how to communicate the importance of HPV vaccination to parents with strong and clear recommendations emphasizing its role in cancer prevention.
- Reference the HPV Vaccination Roundtable Nurses Get It Done toolkit, which empowers nurses to speak to parents, deliver the vaccine, and manage care (not to mention the Clinician Action Guides).
- Invite parish/school nurses and parents to an information session to equip them with necessary information about the HPV vaccine.
- Stress the importance of the HPV vaccine at every visit.



**COMMUNICATE THAT
WELL-CHILD VISITS
ARE ESSENTIAL
BUSINESS
DURING THE
PANDEMIC**

Learn more at:

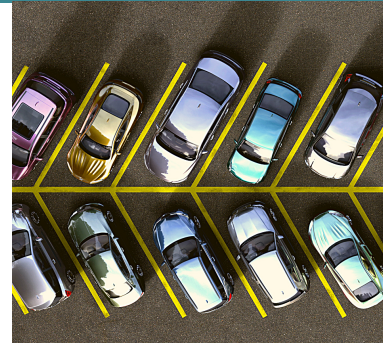
www.cdc.gov/vaccines/parents/visit/vaccination-during-COVID-19.html



VISIT & WORKFLOW OPTIONS

SCHEDULING

- Extend clinic hours to include some evenings and weekends to combat the backlog for all visit types.
- Maintain rates by scheduling well-child visits in the morning and sick appointments in the afternoon.
- Hold specific vaccine days on weekends or nights. Patients have felt comfortable coming in when vaccines are the only service being administered.
- Organize vaccination visits to line up with back-to-school flu shot visits .
- Prioritize the scheduling of second vaccine appointments before patients leave the hospital/clinic.
- Designate staff at a call center for screening and vaccination navigation, further decreasing the physical time patients need to spend at the clinic. This requires a lot of planning, but health centers have been successful in keeping up their numbers.
- Have patients call from their car to check-in and then go directly to their assigned room wearing a mask.



Access key resources from the Immunization Action Coalition's COVID-19 Repository at <https://www.immunizationcoalitions.org/resource-repository>

VISIT TYPES

- Provide appointment options for patients to choose from, such as walk-in visits, nurse visits, or primary care provider visits.
- Use telehealth visits as a precursor to vaccine-only visits.
- Prioritize patients who are past-due first, and revisit sick visit policies.
- Host drive-up clinics where nurses administer vaccines in the parking lot. Patients check-in by calling the front desk, and an encounter slip is printed for the nurse.



VISIT & WORKFLOW OPTIONS

LOCATION

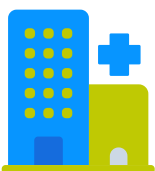
- Move vaccinations to a centralized immunization station within the health system.
- Designate specific pediatric clinics for well-child visits and immunization catch-up only.
- Extend hours at specific sites only for vaccinations.
- Conduct well-child telemedicine visits followed by curbside vaccinations for adolescents.
 - Younger children can still come into the office to make the vaccination process easier.
- Implement home health vaccinations to make patients more comfortable and to accommodate those with transportation issues.
- Remove chairs from the waiting room, and screen people from the car or outside the entrance.
- Explore utilizing urgent care facilities in large health systems to increase patient volume and provide vaccination for adolescents.
- In urban environments, it can be helpful to keep one waiting room open and prioritize people who cannot wait in their cars.



SPOTLIGHTS:



One community health center is conducting well-visits and vaccinations in the building and sick visits in an outdoor tented drive-up clinic with fans, resulting in a significant uptick in their well-visits and vaccination rates.



A San Antonio system is providing weekend well-child-only visits at larger clinics and well-child telemedicine visits with curbside vaccinations so adolescents do not have to come into the office at all.



A Maine system is piloting home health vaccination in three different areas around the state; logistics are still being worked out, but leadership has approved a pilot.



SELECTED CAMPAIGNS

State media campaigns to promote immunization

Michigan:

- MI launched a [#MIHeroForHealth](#) campaign focused on all immunizations with social media posts and other resources.
- A group of health systems, payers, and FQHCs was established to address low visitation rates for cancer screenings.
- MI ran advertisements encouraging families to come in for pediatric immunizations; several Arabic-speaking practices also sent out documents in Arabic.
- Community leaders have helped share these messages.

California:

- [California's HPV Vaccination Roundtable](#) launched their [annual HPV Vaccine Week](#) campaign in the first week of August with messaging encouraging parents to include HPV vaccination in their school preparation.
- They piloted the campaign last year and hope to increase their reach through more organizations and health systems this year.
- California's Immunization Coalition launched a [Don't Wait to Vaccinate](#) campaign.

Louisiana:

- The LA Dept. of Health launched a [statewide media campaign](#) to promote immunization during COVID-19, which will run for several months; packets of materials are being sent to Parish Health Units.



**DEVELOP STATE-WIDE
MEDIA CAMPAIGNS TO
PROMOTE
HPV VACCINATION &
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IMMUNIZATION
DURING COVID-19**



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