



Improving adolescent immunization coverage

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Financial Disclosure

I have no financial conflicts of interest

I will not discuss off-label use of medications

HealthPartners Medical Group (HPMG)

Primary care for Adolescents

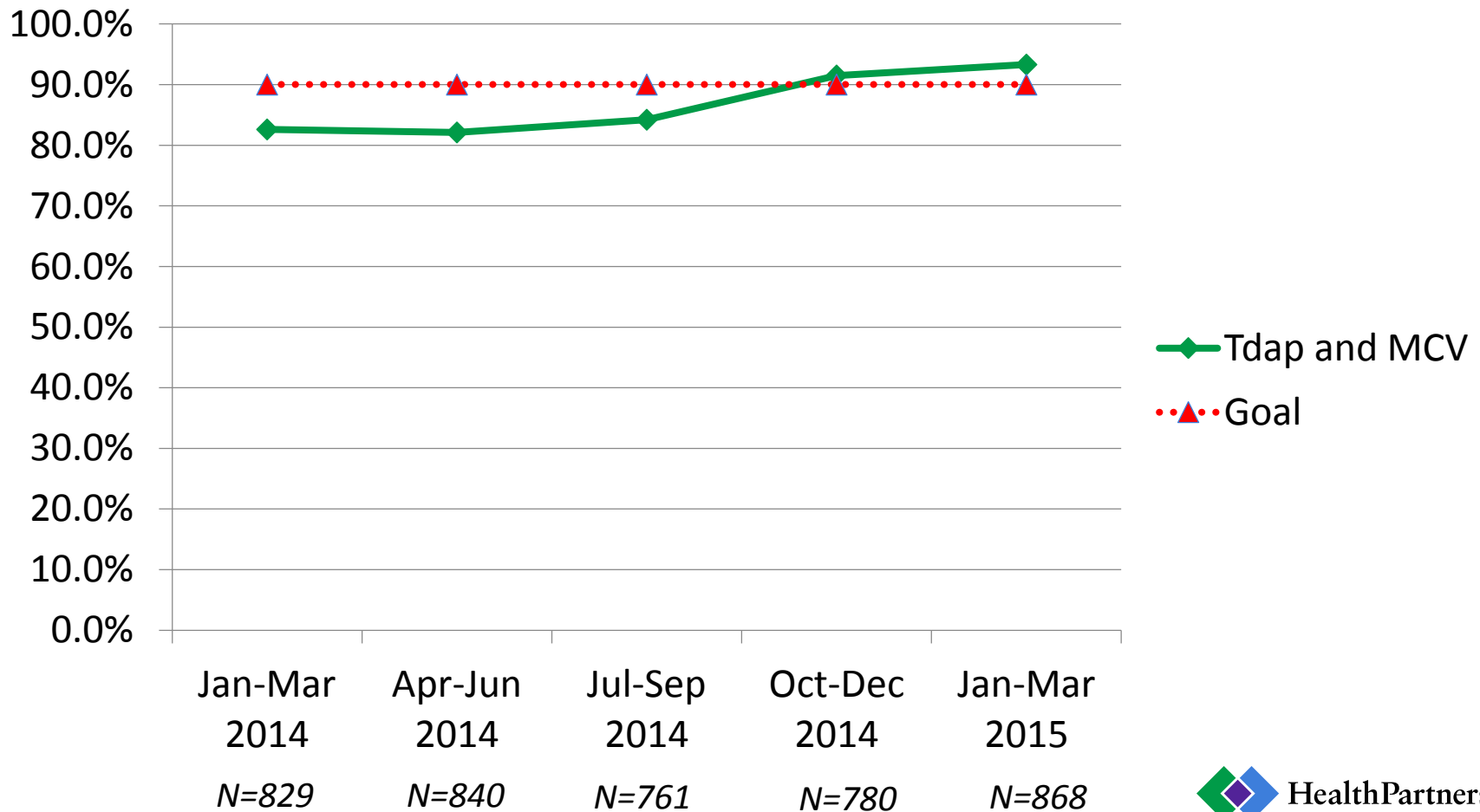
>180
providers

21
pediatric/family practice sites

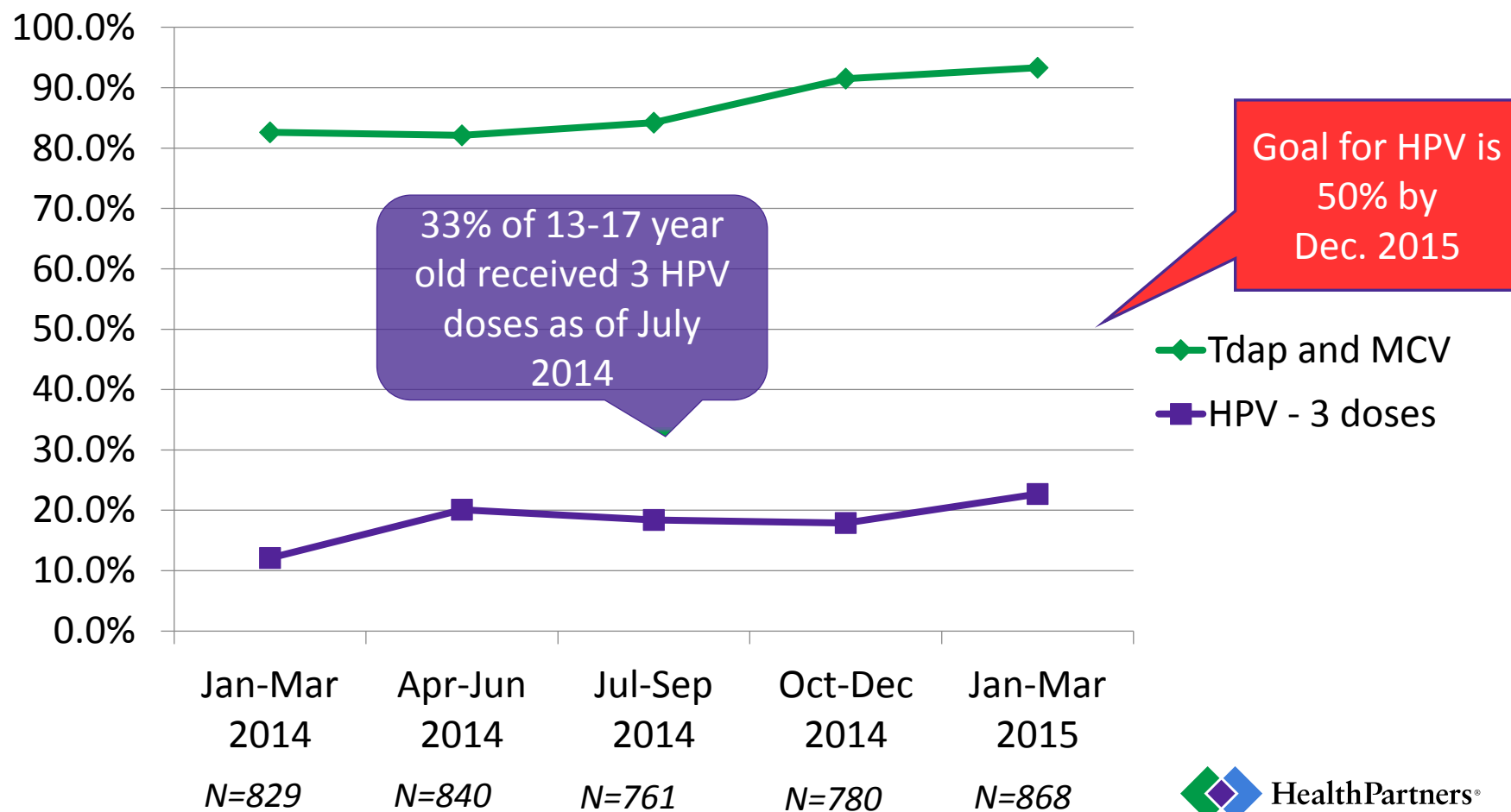
~30,000
visits among
patients 10-17 years



Data from HPMG – Vaccination by age 13



Data from HPMG – Vaccination by age 13



More data on HPV vaccination at HPMG

- Among females turning 13 in the 4th quarter of 2011 with a visit in prior year
 - Average age for first HPV dose was 12.6 years
 - Among the minority completing HPV by age 13, average age for first HPV dose was 11.6 years
- Wide variation in HPV completion by clinic

Strategies used to increase adolescent vaccination

- Culture change among all staff at site
 - Administration of Tdap, MCV *and* HPV for all 11-12 year olds is the norm
 - Vaccinate at every visit
 - HPV framed as “a vaccine to prevent cancer”

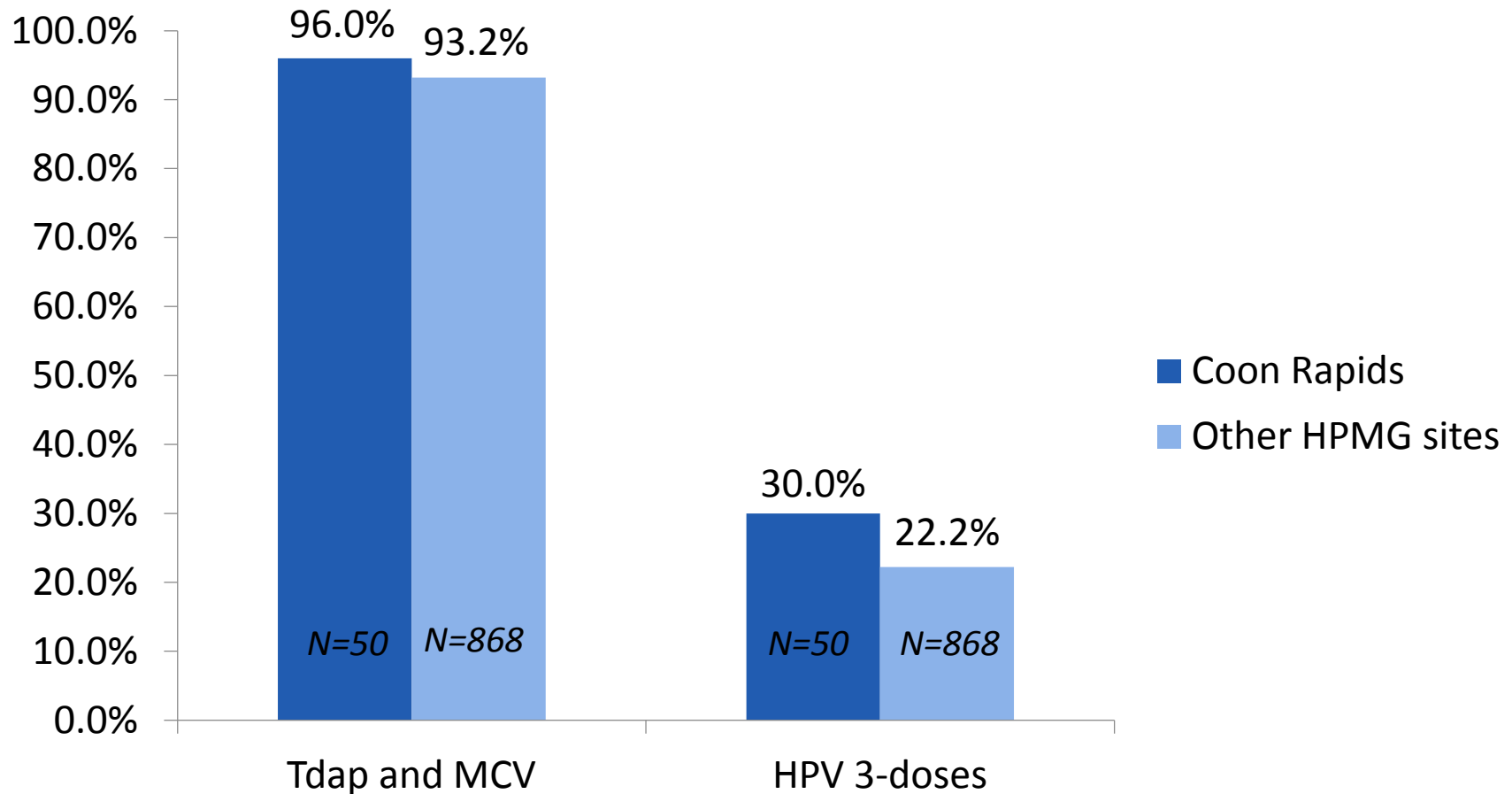


Strategies used to increase adolescent vaccination

- System change
 - Epic-based alerts and standing orders for childhood and adolescent vaccines begin at *earliest age eligible*
 - Vaccination *not* linked to well child visits
 - Epic-based nurse referral for 2nd and 3rd HPV vaccine
 - Quarterly provider feedback



Coon Rapids Clinic versus other HPMG sites January – March 2015



MIIC Reporting

- HealthPartners Medical Group has reported all vaccines to MIIC for many years
 - Manual
 - Weekly batched files
 - Since 6/20/12 Vaccine data transmitted each evening
 - As of 5/6/15, HealthPartners will transition to real-time MIIC reporting
- Patient-level MIIC data can be viewed within Epic
- Next step - *Bidirectional communication*



Additional strategies to consider

- Reminder-recalls
 - Text message
 - Mail
 - Email
 - Phone
- Alternate site vaccination

Table 3

Odds of becoming up-to-date for all recommended vaccines adjusted for age and gender

	Intervention groups versus enrollment phone call-only group	Intervention versus control groups ^a
	OR ^b (95% CI ^c)	OR ^a (95% CI)
E-mail (N = 963)	1.86 (1.54–2.25)	2.43 (2.07–2.85)
Postcard (N = 282)	2.33 (1.72–3.14)	3.07 (2.32–4.07)
Text messaging (N = 552)	3.34 (2.71–4.12)	4.37 (3.64–5.25)
Enrollment phone call-only (N = 3,253)	1.00 ^c	1.31 (1.173–1.45)
Nonintervention (N = 116,356)	NA	1.00 ^d

CI = confidence interval; NA = not applicable; OR = odds ratio.

^a Control groups are the enrollment phone call-only and no contact groups.

^b The ORs were calculated using logistic regression adjusted for age and gender.

^c The enrollment phone call-only group as the reference group.

^d The no contact group as the reference group.



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