HPV Call-to-Action

September 26, 2018

*This webinar is being recorded and will be posted on the password-protected section of the AIM website*
Utilizing Data to Improve Adolescent HPV Rates

DATA → KNOWLEDGE → ACTION
Agenda

• Housekeeping
• Speaker Bios
• Presentations
  • Utilizing Data to Improve Adolescent HPV Rates: The Hoosier Experience
  • Texas VFC Adolescent Immunization Provider Report Cards
• Q&A
Webinar Tech-Tips

Choose EITHER your telephone or your computer’s microphone and speakers.

If you are dialing in on telephone, enter audio pin #yourpin#.

Click either:
✓ “USE Telephone” for cell phone or land line
   OR
✓ “USE Mic & Speakers” for computer audio and voice
Discussion

During the session, you can use this button to "Raise Your Hand" if you have a question.

Type question in Question Box and AIM Staff will read your question to the panelist.
Dave McCormick
Division Director
Immunization Division
Indiana State Department of Health
Lauren Hoffman-Arriaga, MPH
Epidemiologist
Immunization Assessment, Compliance, and Evaluation Group
Texas Department of State Health Services
Utilizing Data to Improve Adolescent HPV Rates: The Hoosier Experience

Indiana State Department of Health - Immunization Division
September 26, 2018
Agenda

- Indiana Adolescent Coverage Rates
- HPV Maintenance of Certification
- HPV Roundtable
- School Immunization Requirements
Indiana Adolescent Coverage Rates
Adolescent Vaccines

Adolescent Vaccines Males and Females

Indiana is 2nd in the nation for Tdap

HP 2020 Goal

Indiana is 4th lowest in the nation

Region 5: IN, WI, MI, OH, MN, IL
HPV-Associated Cancer Rates by State

Estimated annual numbers of HPV-associated cancers attributable to HPV 16/18 and 5 additional types in 9-valent vaccine, Indiana, 2010-2014

Proportions of attributable cancers from Viens et al, [http://www.cdc.gov/mmwr/volumes/65/wr/mm6526a1.htm](http://www.cdc.gov/mmwr/volumes/65/wr/mm6526a1.htm)
HPV Maintenance of Certification
HPV Maintenance of Certification

- Partnership with the Indiana Immunization Coalition
- 25 Part 4 points toward a MOC
- VFC educational requirement
- Providers that had less than a 25% completion rate
  - 271 Provider offices
- Pre-test & post-test, patient tracking
- Provider feedback
HPV: Don’t Wait. Vaccinate!
Increasing 1st Dose HPV Vaccine Uptake

Email
Password

Remember Me  Forgot password

SIGN IN
Sign up for an account
Comprehensive Cancer Control
HPV Vaccination Workshop
Indiana’s Team

Lisa Robertson, Executive Director
Indiana Immunization Coalition

Katie Crawford, Health Systems Manager
American Cancer Society

Keylee Wright, Director
Cancer Control Division

Dave McCormick, Director
Immunization Division
Action Items

- Comprehensive Cervical Cancer Plan
- HPV Stakeholder Meeting
  - Health Plans
  - Community Partners
  - Stakeholders
- Legislative Educational Event
- HPV Roundtables
- IHSAA Physical form
- Health Plan report cards
School Immunization Requirements
Indiana Code gives the Indiana State Department of Health the authority to add school immunization requirements

- Added Hepatitis A requirement for incoming sixth graders to create a touchpoint that complements HPV

- Added Hepatitis A requirement for incoming seniors to create a final touchpoint before aging out of the VFC program

- Minimal resistance due to national Hepatitis A outbreak

### 2018-2019 School Immunization Requirements

<table>
<thead>
<tr>
<th>Grade</th>
<th>Required</th>
<th>Recommended</th>
</tr>
</thead>
<tbody>
<tr>
<td>3-5 years old</td>
<td>3 Hep B</td>
<td>1 Varicella (Chickenpox)</td>
</tr>
<tr>
<td>K-4th grade</td>
<td>5 Hep B</td>
<td>2 MMR</td>
</tr>
<tr>
<td>5th grade</td>
<td>5 Hep B</td>
<td>2 MMR</td>
</tr>
<tr>
<td>6th grade</td>
<td>5 Hep B</td>
<td>2 MMR</td>
</tr>
<tr>
<td>7th-11th grade</td>
<td>5 Hep B</td>
<td>2 MMR</td>
</tr>
<tr>
<td>12th grade</td>
<td>5 Hep B</td>
<td>2 MMR</td>
</tr>
</tbody>
</table>

**INDIANA 2018–19 Required and Recommended School Immunizations**

![Image of kids and a nurse with a clipboard]

- Hep B: the maximum age for the 3rd dose of Hep B is 12 weeks.
- MMR: 2 doses of MMR are acceptable if the 2nd dose was administered on or after the child’s 4th birthday.
- Polio: 4 doses of Polio are acceptable for all students.
- HPV: for students in grades K-4th, the final dose must be administered on or before the 4th birthday and before the 4th birthday.
- Varicella: for students entering preschool, the recommendation is 1 dose of Varicella vaccine.
- Hep A: for students in grades 7-11, 2 doses of Hep A are recommended.

**Indiana Immunization Coalition**

[www.indianacoalition.org](http://www.indianacoalition.org)
Contact Information

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Indiana State Department of Health
2 N. Meridian Street, 3rd floor
Indianapolis, IN 46204
317.233.7010
dmccormick@isdh.in.gov
TVFC Adolescent Immunization Provider Report Cards

Texas DSHS Immunization Unit
Texas vs National HPV Coverage

One-Dose HPV by Sex, 2008-2017

Source: NIS-Teen 2017
Texas VFC (TVFC) Providers

• 60% of our adolescent population is TVFC eligible
• 3200 providers throughout the state
• TVFC data is accessible to DSHS
TFVC Adolescent Immunization Provider Report Card

- One-page report sent to TVFC providers contains a ratio of Tdap:HPV vaccine administered by the provider
  - Electronic Vaccine Inventory (EVI)
- Reports began in 2015
- Emailed semiannually
- Prior to 2017, reports used vaccine ordering data
Adolescent Immunization Provider Report Card

TVFC Provider Report on Adolescent Vaccines Administered

<table>
<thead>
<tr>
<th>Ideal Tdap:HPV Ratio</th>
<th>Time Frame Comparison</th>
<th>2017 Current Ratio Rating</th>
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<tr>
<td></td>
<td>Jan - Dec 2016</td>
<td>Jan - Dec 2017</td>
</tr>
<tr>
<td>1 Tdap: 2.00 HPV</td>
<td>1 Tdap: 2.82 HPV</td>
<td>1 Tdap: 3.55 HPV</td>
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</table>

In January through June 2017, for every 1 dose of pediatric Tdap administered, your clinic also administered 3.55 doses of pediatric HPV vaccine. The Tdap:HPV Ideal ratio was updated to incorporate the latest ACIP recommendations for HPV. Beginning in 2017, ratios of 2.00 or more indicate excellent utilization of HPV vaccine. Current ACIP recommendations advise that teens beginning their HPV series before the age of 15 may receive 2 doses of HPV, otherwise any teen beginning the HPV series at age 15 or later should receive 3 doses of HPV vaccine.

Jan-Dec 2017 Current Ratio Rating Scale

<table>
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<tr>
<th>Tdap:HPV Administered Ratio</th>
<th>HPV Vaccine Administered Adherence Rating</th>
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<tr>
<td>≥ 1 Tdap: 2.00 HPV</td>
<td>Excellent</td>
</tr>
<tr>
<td>≥ 1 Tdap: 1.50 HPV – 1 Tdap: 1.99 HPV</td>
<td>Good</td>
</tr>
<tr>
<td>&lt; 1 Tdap: 1.49 HPV</td>
<td>Needs Improvement</td>
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* TVFC vaccine administered data for pediatric doses of Tdap and pediatric doses of HPV were assessed to calculate ratio data. Ratios of 1 Tdap:0.00 HPV indicate HPV vaccine was not administered for PIN in respective time frame.

Adolescent Vaccines History, Jan-Dec 2016 vs Jan-Dec 2017

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<th>Percent Doses Admin. Changed</th>
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</tr>
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The CDC recommends routinely assessing your clinic’s immunization rates and examining vaccine administered data trends. Reviewing vaccine administered data at the clinic level can help to identify missed opportunities for HPV vaccination when compared to other adolescent vaccines. If you have questions about this report, please contact your local or regional TVFC representative.
### Section 1: Ratio and Reference Scale

#### Tdap to HPV Vaccine Administered Ratio Report*

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Section 2: Additional Performance Measures

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Report Card Receipt Stats, 2015-2018

3,576

2 x year

20,484
TVFC HPV:Tdap Doses Administered Ratio Trend

* Change to ACIP HPV recommendation requiring less doses for children initiating the series before their 15th birthday.
Project Evaluation

• Repeated measures ANOVA
• Statistically significant increases in ratios over time
• Time in program associated with difference in ratios
  • Longer time in program → larger increase in HPV:Tdap ratio of doses administered

<table>
<thead>
<tr>
<th>Year</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>2014</td>
<td></td>
<td>1.04</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2015</td>
<td></td>
<td></td>
<td>1.22</td>
<td>1.26</td>
<td>1.40</td>
</tr>
<tr>
<td>2016</td>
<td></td>
<td></td>
<td></td>
<td>1.02</td>
<td>1.09</td>
</tr>
<tr>
<td>2017</td>
<td></td>
<td></td>
<td></td>
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<td>1.11</td>
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Next Steps

• Continuing semiannual mail outs
• Further evaluation of the project
• Enhancements to report card in 2019
• Has inspired report cards for other program areas
Thank you!

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Q&A
Please Participate!!
Reminders

- Take the event evaluation that appears at the end of the webinar.

- Your feedback will help us improve!