



Increasing HPV Vaccination Rates

Make a Strong Recommendation

Human papillomavirus (HPV) vaccine should be recommended at every visit, including high school activity physicals, minor sick visits, etc. Research shows that HPV vaccine acceptance, like most vaccines, is influenced mostly by provider recommendation.

When offering HPV vaccine, offer it as you would Tdap or meningococcal vaccine. HPV vaccine should not be viewed as less important just because it is not required for school. It should not be offered as an “optional” vaccine, but as a routinely recommended vaccine like all the other vaccines. Presenting the necessary vaccines as a package, saying “today your child needs HPV, Tdap, and meningococcal vaccines,” can be very effective. Once all vaccines are presented, you can answer any questions the parents may have.

The Minnesota Department of Health created short HPV vaccine communication vignettes which demonstrate the best and the worst ways to present HPV vaccination. The vignettes are available at www.health.state.mn.us/divs/idepc/immunize/hcp/adol/hpvvideos.html.

Additionally, the Centers for Disease Control and Prevention developed an excellent tip sheet that will assist you in answering questions parents may have about HPV vaccine. The fact sheet is available at www.cdc.gov/vaccines/who/teens/for-hcp-tipsheet-hpv.pdf.

PEDIATRICS - Jonathan Temte, University of Wisconsin School of Medicine and Public Health and Chair of the United States Advisory Committee on Immunization Practices:

“...I have found a simple analogy of great utility in my practice. Most parents are familiar with, and endorse, the use of bicycle helmets. When discussing HPV vaccine with 11 and 12 year-olds and their parents, I will ask the simple question:

When do you want your children to put on their bike helmets?

- A. Before they get on their bike*
- B. When they are riding their bike in the street*
- C. When they see the car heading directly at them*
- D. After the car hits them*

I usually end up with a smile and a successfully launched series.”

Avoid Missed Opportunities

Immunization rates for Tdap and meningococcal vaccination are high in North Dakota (95.0% and 93.7% respectively), which shows that adolescents are presenting for vaccinations, but not receiving all vaccines for which they are eligible. In 2013, 98 percent of North Dakota girls who were unvaccinated against HPV had a missed opportunity for HPV vaccination. A missed opportunity is a healthcare encounter (other vaccination) where a person does not receive a vaccination for which he or she is eligible.

Make sure your clinic is using the immunization forecaster in the North Dakota Immunization Information System (NDIIS). The NDIIS forecaster will assist you and your staff in determining which vaccines a child is due for.

North Dakota children participating in high school activities are required to have an annual physical. Make sure your facility is assessing the immunization status of all adolescents presenting for physicals and offering vaccines when needed.

Immunization Reminder/Recall

Numerous studies (62) have found immunization reminder/recall to be an effective method of increasing immunization rates. Your clinic can easily conduct immunization reminder/recall using the NDIIS. Try sending reminders for adolescent vaccines to all children turning 11 in your practice. Be sure to schedule subsequent doses of HPV vaccine at the time of the first dose being administered. Recall adolescents who still need second and third doses.

The North Dakota Department of Health (NDDoH) is conducting quarterly recall of all adolescents ages 12 to 17 for Tdap, meningococcal conjugate, varicella, and HPV vaccines (if started the series). As parents present their children for these vaccines, be sure to strongly recommend HPV vaccine as well.

Immunization Quality Improvement

Many health systems and clinics are conducting quality improvement initiatives. Immunization rates are an excellent way to achieve quality improvement initiatives, because it is easy to evaluate progress by monitoring rates. Select HPV vaccination rates as a quality improvement initiative for your organization. Start small by having a goal of increasing rates by 10 percent over the next year.

Identify an HPV Vaccination Champion

Every organization should have an immunization champion to act as a steward and an advocate for immunizations. Find an HPV vaccination champion at your facility to educate and motivate staff to increase rates. Connect pediatricians and family practice physicians with OB-GYNs and oncologists. Oncologists don't want your patients to be their patients in the future.

Know Your Immunization Rates

Studies have shown that providers often overestimate their immunization coverage rates. The NDDoH immunization program emails clinic-level adolescent immunization rates based on NDIIS data to Vaccines For Children (VFC) Program providers throughout the state on a quarterly basis. Your clinic can use these rates as a baseline to determine whether or not HPV vaccination efforts are working at your facility or if changes need to be made. If you are a VFC provider and would like to know your clinic's rates, please contact the immunization program.

Contact the NDDoH Immunization Program at 800.472.2180 for more information or to request assistance in increasing HPV immunization rates.

